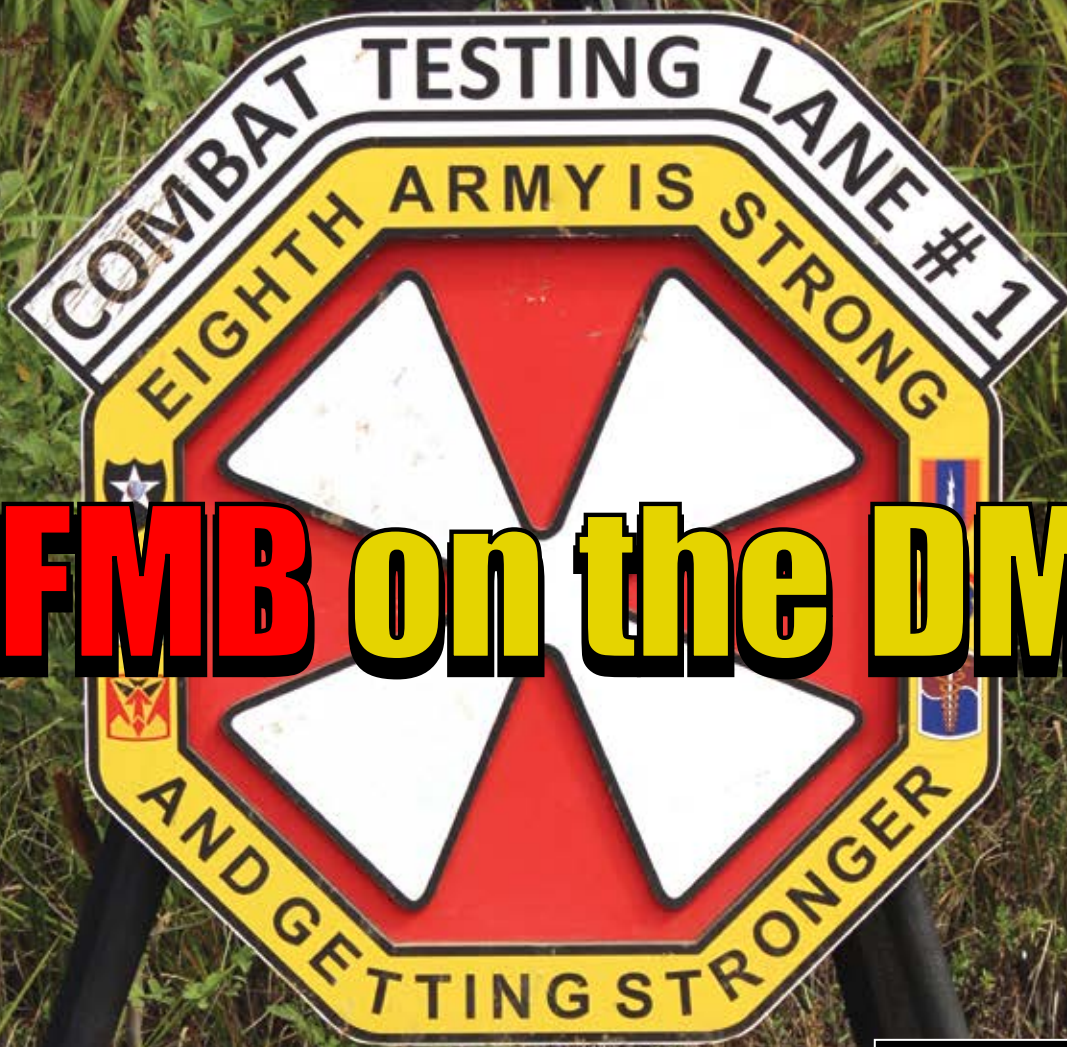


Pulse 65

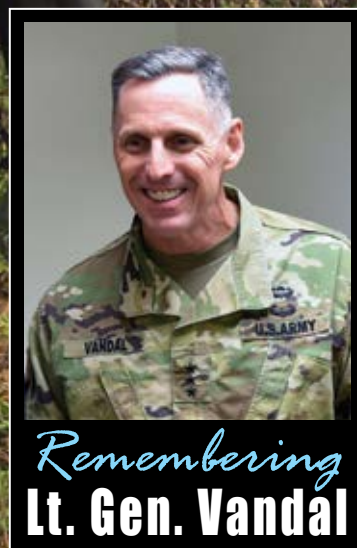
OCT./NOV. 2018



EFMB on the DMZ

**HALLOWEEN
MOVIE GUIDE**

*FAMILY
ADVENTURES in
Palau, Micronesia*



*Remembering
Lt. Gen. Vandal*

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.”

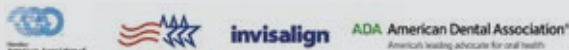
Wide-range of dental treatments provided at Columbia Dental Clinic



- 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

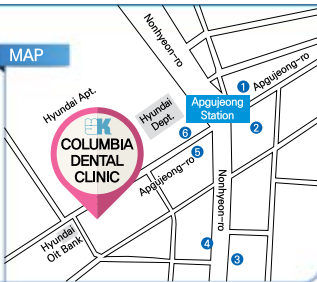
#401(4F) Karocity 2, 579 Sinsa-Dong Gangnam-Gu Seoul, South Korea

SUBWAY

Orange Line No.3
Apgujeong Station Exit No.5

BUS

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Kwanglim Church Station :
4419, 3422, 4312, 9470, 240



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EDITOR'S LETTER

Dear readership of the PULSE65, the editorial staff would like to say thank YOU for taking the time to pick up a copy of our magazine. This month is a special combined issue for the months of October and November. It is special in so many ways.

This edition highlights the most coveted badge for medical personnel – the Expert Field Medical Badge, combat support hospital training at U.S. Army Garrison Humphreys, 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 civilian workforce and our Public Health team is working hard to provide all of our beneficiaries access to the vaccination.

Also check out the changes to the Bi-Lingual Medical Advice Line, TRICARE On-Line Secure Messaging, the testing of the new Army Physical Fitness Test and the upcoming changes to the TRICARE Dental program for retirees.

A special thanks to returning correspondent, Capt. Kyle Hoedebecke for his contribution on Palau in the Family Adventures in Asia segment.

Looking for a spooky thriller movie around Halloween then check out the special Halloween Movie Guide.

On a somber note, it is with a saddened heart when we heard about the passing of Lt. Gen. Thomas Vandal. A special tribute pictorial can be found inside this edition.

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.

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. 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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Sentry



DSC, Sentry



DSC, Sentry



DSC, 3rd MI



DSC



TMM, USFK, Sentry



DSC, TMM



DSC, Zoeckler



DSC, Sentry



DSC



DSC, Sentry



DSC, Sentry, TMM



DSC, NCOA



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40

EFMB on the DMZ

Over the past five decades, hundreds of thousands of Soldier Medics have attempted to earn the AMEDD's most prestigious peace-time badge. Currently less than 10% of all AMEDD personnel have earned the EFMB. This year, testing began with 205 candidates and culminated with 18 graduates earning the coveted badge.



Remembering Lt. Gen. Vandal



Halloween Movie Guide



Family Adventures in Palau, Micronesia



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Lieutenant General Thomas S. Vandal (U.S. Army Retired) 1960-2018

The 65th Medical Brigade pays tribute to the epitome of an American Soldier. See the pictorial on pages 18 and 19. (Photo by William Wight, 65th Medical Brigade Public Affairs Office)



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Icheon Rice Cultural Festival

167-29, Gyeongchung-daero
2697beon-gil, Icheon-si
www.ricefestival.or.kr



OCT20-21
Jeju Seongeup Village Tradition
Reenactment Folk Festival

9, Seongeupjeonguihyeon-ro
22beon-gil, Seogwipo-si, Jeju-do
70ni.seogwipo.go.kr



OCT20-28
Busan One Asia Festival

344, World cup-daero, Yeonje-gu,
Busan
www.bof.or.kr



OCT20-28
Yeongju Punggi Insam Festival

Ohyeon-ri, Bonghyeon-myeon,
Punggi-eup, Yeongju-si, Gyeongbuk
www.ginsengfestival.com



OCT25-28
Jeonju Bibimbap Festival

95, Seohak-ro, Wansan-gu,
Jeonju-si, Jeollabuk-do
www.bibimbapfest.com



OCT26-NOV04
Iksan Ten Million Chrysanthemum Festival

322, Hana-ro, Iksan-si,
Jeollabuk-do
www.iksan.go.kr/gukhwa



OCT27
Seoul Fashion Festival 2018
Halloween Red Moon

Jamsil Indoor Gymnasium, Seoul
www.trazy.com



OCT27
Busan Fireworks Festival

219, Gwanghaebyeon-ro,
Suyeong-gu, Busan
www.bfo.or.kr



OCT27-NOV04
Geoje Island Flower Festival

Geoje-si Agriculture Development
Complex
www.geoje.go.kr



NOV01-11

Seoul International Music
Festival (SIMF)
Seoul Arts Center, Lotte Concert
Hall, etc.
www.simf.kr



NOV02-18
Seoul Lantern Festival

Cheonggyecheon Plaza to Supyo-
gyo Bridge (1.2 km)
www.seoul lantern.visitseoul.net



NOV23-NOV25
Paju Jangdan Soybean
Festival

177, Imjingak-ro, Paju-si,
Gyeonggi-do
tour.paju.go.kr

ARE YOU PART OF LEGACY OF YONGSAN GARRISON YET?



© Yongsan Legacy

Pictured above:
Yongsan @ Heart Exhibition held at the War Memorial of Korea in spring 2018 featuring 24 individuals who spent part of their lives in Yongsan Garrison

Hundreds of people like you have already shared stories and memories to be part of Yongsan Legacy. And groups like Seoul American High School Alumni, USFK Spouses Club and Dragon Hill Lodge imparted their stories to be included in the Yongsan Legacy project.

“preserving the
invaluable treasures of
Yongsan Garrison”



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www.yongsanlegacy.org



NAVIGATING KOREAN HOSPITALS

THIS MONTH'S HIGHLIGHTS



Keimyung University Dongsan Medical Center

International Healthcare Center(IHC) at Keimyung University Dongsan Medical Center is a specialized department providing one-stop services to the international patients. They opened as a clinic treating US military patients in 1967 and became the 1st designated hospital for US soldiers and families in Daegu and Gyungbuk area and developed as International Healthcare Center. Currently listed among the best international patient care services in the nation by the Ministry of Health and Welfare, they strive to maintain streamlined, professional and personalized services for all international patients seeking good medical care and keep close cooperation with the global insurance companies for a better claim service. Highly qualified staff are always ready to assist patients for appointments, language assistance, payment, insurance claim, and one-to-one escort.

International clinic working hours:

M – F 0900 – 1730, Sat. 0900 – 1230 (office only)

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Fax: 053-250-7995

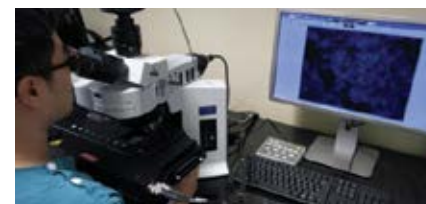
Email: ihc@dsmc.or.kr

Location: 56, Dalseongro, Junggu, Daegu 41931

Website: www.wooskin.co.kr

Directions (Subway): Seomun Market (Dongsan Hospital) Station line #3, Exit 5 then 3 min. walking distance.

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



Yeouido St. Mary's Hospital

Yeouido St. Mary's Hospital has established a comprehensive system to provide optimal medical treatment based on Catholic spirituality for diseases occurring from the beginning to the end of life. Yeouido St. Mary's Hospital, the predecessor of Catholic medical institutions and the center of the domestic medical mission, is a key spiritual realization hospital facing great challenges as a patient-centered futuristic hospital.

The Catholic University of Korea Yeouido St. Mary's Hospital is endeavoring to practice the love of Jesus Christ, the healer, by taking the lead in the holistic treatment and medical service for neighbors suffering from diseases through the spirit of implementing the Catholic doctrine.

The Catholic University of Korea Yeouido St. Mary's Hospital International Healthcare Center opened in February 2013 and is the only university hospital in Yeouido, Seoul financial district. It signed a Memorandum of Understanding with Seoul Metropolitan City in 2010 and strives for the convenience of foreign patients.

Phone: 02-3779-2212

International clinic working hours:

M – F 0800 – 1700

Fax: 02-3779-2009

Email: iysm@catholic.ac.kr

Location: 63-ro 10, Yeoungdeungpo-gu, Seoul

Website: www.cmcsungmo.or.kr

Directions (Subway): Daebang Station line #1 exit 6 toward Yeouido, take the shuttle bus or Yeouido Station line #5 exit 5, take the shuttle bus

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

Live MUSIC&DANCE CALENDAR



OCT26

Plácido Domingo Concert In Seoul

Jamsil Indoor Gymnasium, Seoul
ticket.interpark.com



OCT28

Evgeny Kissin Piano Recital

Seoul Art Center Concert Hall
www.sacticket.co.kr



OCT30

Chick Corea

Lotte Concert Hall
www.lotteconcerthall.com/eng



OCT30

KYGO: Kids In Love Tour in Seoul

Olympic Hall, Seoul
ticket.interpark.com



NOV02-03

Carla Bruni

Seoul: Grand Peace Palace,
Kyunghee University (11/2)
Busan: Bexco Auditorium (11/3)
ticket.yes24.com



NOV03

Yuri Temirkanov & St. Petersburg Philharmonic Orchestra

Lotte Concert Hall
www.lotteconcerthall.com/eng



NOV04

Andras Schiff Piano Recital

Lotte Concert Hall
www.lotteconcerthall.com/eng



NOV07-08

Charlie Puth Live in Seoul

Jamsil Indoor Gymnasium, Seoul
ticket.interpark.com
ticket.yes24.com



NOV11

Owl City Live in Seoul 'Cinematic'

Blue Square, Seoul
ticket.interpark.com



NOV11

The 1978 Larry Carlton & Steely Dan

Yonsei Culture & Art Center
ticket.interpark.com



NOV15

2018 The 35th Korea International Music Festival

Lotte Concert Hall
www.lotteconcerthall.com/eng



NOV29-30

Mariss Jansons/Evgeny Kissin with Symphonieorchester des Bayerischen Rundfunks

Seoul Art Center Concert Hall
www.sacticket.co.kr

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The 65th Medical Brigade Pays Tribute to Former 8th Army Commander

Photos by William Wight
65th Medical Brigade Public Affairs Office

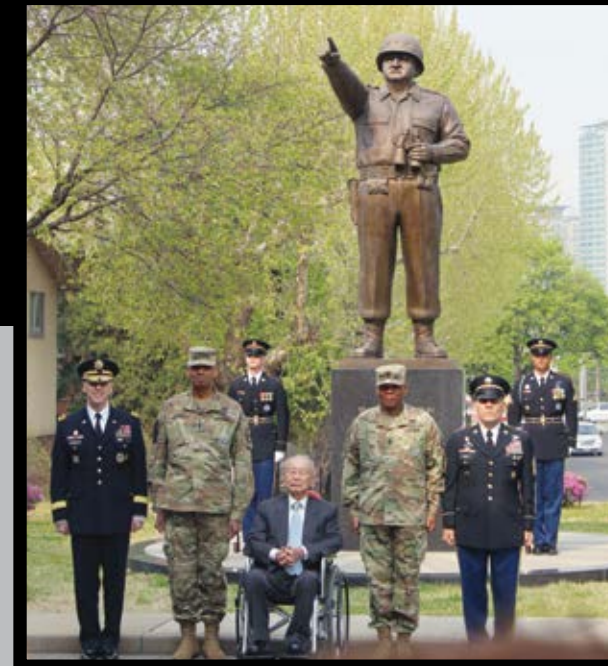
The PULSE65 editorial staff and the entire 65th Medical Brigade send our condolences to the family of Lt. Gen. Thomas S. Vandal who passed this life October 7 after a ten month long fight with pancreatic cancer. A tremendous leader, charismatic mentor, devout Christian, loving husband and father, he will be deeply missed by many.

Vandal relinquished command of Eighth United States Army in January 2018 and officially retired September 1, 2018. A 1982 West Point graduate and veteran of the Iraq war, he not only served as

Commanding General of Eighth Army and Chief of Staff of Combined Forces Command in South Korea from February 2016 to January 2018 but also commanded the 2nd Infantry Division from June 2013 to April 2015.

He played a major role in the transformation and relocation of United States Forces Korea to U.S. Army Garrison Humphreys.

The 65th Medical Brigade pays tribute in this month's PULSE65 with a pictorial remembering Lt. Gen. (Retired) Vandal.



SCENE & HEARD

NATIONAL & INTERNATIONAL

By Eric Young-Seok Park

SNOWSTORM KILLS NINE CLIMBERS ON NEPAL PEAK



Nine members of a South Korean climbing expedition were killed after a violent snowstorm swept them off a cliff on Nepal's Mount Gurja, one of the deadliest mountaineering accidents to hit the Himalayan nation in recent years. The bodies of eight climbers -- four South Koreans and four Nepali guides

-- were spotted near the wreckage of their camp by a rescue team Saturday morning, but strong winds were hampering the search effort. A fifth South Korean climber was initially reported missing, but officials later confirmed he was at the camp when the deadly storm hit and also perished. "A mountain expedition of five South Korean nationals and four foreigners were swept off by strong winds at the base camp during their climb to Mount Gurja. (They) fell off a cliff and died," the South Korean foreign ministry said in a statement. Helicopter pilot Siddhartha Gurung was among the first people to reach the site after the deadly storm and described a scene of total destruction. He said all the tents had been flattened, reduced to a tangled mess of tarpaulin and broken polls, and the climbers' bodies were scattered across a wide area, including some in a river bed some 500 metres (yards) from the main camp. "Everything is gone, all the tents are blown apart," said Gurung. The freak storm is the deadliest incident to hit Nepal's mountaineering industry since 18 people were killed at Mount Everest's base camp in 2015 in an avalanche triggered by a powerful earthquake.

SAMSUNG'S MOBILE BOSS CONFIRMS NEW DETAILS FOR THE LONG-AWAITED FOLDABLE GALAXY F



The rumor mill keeps churning so rapidly about Samsung's much-hyped, much-delayed foldable phone that it's starting to look like Galaxy F (for fast) may be the perfect name for this quick generator of interest among tech bloggers. The president and

CEO of Samsung's mobile division a few days ago spilled the beans on a big detail about the long-awaited foldable device that the company has been working on for some two years: At the Galaxy A9 launch event a few days ago, DJ Koh touted the device as a combination tablet and phone. Among other specifics he confirmed, Koh also reportedly said that it will be possible to use the so-called Galaxy F as a tablet with the capability to multitask before folding it for use as a phone. He didn't confirm any specifics about the display, but he reiterated that Samsung very much feels like it needs to have a foldable phone of some kind out there. Although he expected the hybrid device to initially find a niche market, Koh said that he believed it would expand, and that "we do need a foldable phone." Still, though, it seems we'll have a bit of a wait before we get our first look at it. We'd been expecting a sneak peak of some kind next month at Samsung's developers' conference in San Francisco. Now, word is the phone might not even be unveiled this year at all.

STEPHEN HAWKING'S LAST PAPER ON BLACK HOLES IS NOW ONLINE



Stephen Hawking never stopped trying to unravel the mysteries surrounding black holes -- in fact, he was still working to solve one of them shortly before his death. Now, his last research paper on the subject is finally available online through pre-publication website ArXiv, thanks

to his co-authors from Cambridge and Harvard. It's entitled Black Hole Entropy and Soft Hair, and it tackles the black hole paradox. According to Hawking's co-author Malcolm Perry, the paradox "is perhaps the most puzzling problem in fundamental theoretical physics today" and was the center of the late physicist's life for decades. The information paradox arose from Hawking's theoretical argument back in the 1970s that black holes have a temperature. As such, they're bound to evaporate over time until there's nothing left, releasing energy now called the "Hawking Radiation." See, it's believed that when an object enters a black hole, its information gets preserved on its surface forever even if it vanishes from sight. If a black hole evaporates, though, then so will that information. That creates a paradox, because according to the rules of quantum physics, information can never be destroyed. The new paper shows how that information can be preserved by photons called "soft hair" surrounding the edge of black hole, which you might know as the event horizon. According to Hawking, Perry, Andrew Strominger and Sasha Haco, a black hole's temperature changes when you throw an object (say, a planet's atoms) into it. The hotter it gets, the more its entropy (its internal disorder) rises. That entropy is what's preserved in a black hole's soft hair.

AIR CANADA'S NEAR MISS LAST YEAR WAS ALMOST 'WORST ACCIDENT IN HISTORY'



A near miss involving an Air Canada plane which almost landed on a crowded taxiway instead of a runway at San Francisco airport last year could have been the "worst aviation accident in history," according to an official report. The Air Canada Airbus A320 carrying 140 people was cleared

to land on Runway 28-Right at San Francisco International Airport shortly before midnight on July 7, 2017 -- but the pilot inadvertently lined up for Taxiway C, where four planes were waiting to take off. "Only a few feet of separation prevented this from possibly becoming the worst aviation accident in history," said Bruce Landsberg, vice chairman of the National Transportation Safety Board. The report said the flight crew's misidentification of the taxiway as the intended runway "resulted from the crewmembers' lack of awareness of the parallel runway closure due to their ineffective review of notice to airmen (NOTAM) information before the flight and during the approach briefing." Other contributing factors were "the flight crew's failure to tune the instrument landing system frequency for backup lateral guidance, expectation bias, fatigue due to circadian disruption and length of continued wakefulness, and breakdowns in crew resource management."

POLICE TOLD TO AVOID LOOKING AT RECENT IPHONES TO AVOID LOCKOUTS



Police have yet to completely wrap their heads around modern iPhones like the X and XS, and that's clearer than ever thanks to a leak. Motherboard has obtained a presentation slide from forensics company Elcomsoft telling law enforcement to avoid looking

at iPhones with Face ID. If they gaze at it too many times (five), the company said, they risk being locked out much like Apple's Craig Federighi was during the iPhone X launch event. They'd then have to enter a passcode that they likely can't obtain under the US Constitution's Fifth Amendment, which protects suspects from having to provide self-incriminating testimony. There are ways around this system, whether or not they're ethically sound -- the FBI recently forced a suspect to unlock his iPhone X using Face ID. Some warrants can explicitly offer permission to use face unlocking. Many investigators won't know about the alternatives, though, and there won't always be an option to use the accused person's face. There's no guarantee other countries will allow forced face recognition, either.

MAN WHO SHOT AT BLACK TEEN-AGER ASKING FOR DIRECTIONS TO SCHOOL CONVICTED FOR ASSAULT

A Michigan man has been found guilty of assault after firing his gun at a black teenager who stopped by his home to ask for directions to school. The incident was caught on the man's home security camera, and shows the teenager approach the home and knock on the door. Several moments later, the teen runs away from the house and the man emerges with a gun. He then shoots at the young man running away from his home. The man, Jeffrey Ziegler, was convicted of assault with attempt to murder and possession of a firearm the commission of a felony on Friday. In his arraignment, Ziegler said that there was "a lot more to this story than what is being told". He said that he was concerned that the teenager, 14-year-old Brennan Walker, was trying to rob his home. He also claimed that he only fired because he tripped. Brennan told local media that he had stopped by to ask for directions to his high school after missing the bus, and that a woman had appeared when he knocked on the door yelling at him.

TESLA'S MODEL 3 PASSES THE 100,000 MARK

Tesla Inc. just reached a significant round-number milestone: 100,000 Model 3 electric cars have left the factory. It's a remarkable achievement considering that earlier this year Tesla's plans for extreme automation fell apart, forcing its top engineers to rip out



factory lines, erect an enormous tent and revise the entire assembly process. But the latest production numbers are a sign that these dramatic actions taken by Chief Executive Officer Elon Musk were effective. Tesla is now selling more Model 3s in the U.S. than all other brands of electric cars combined. In the luxury sedan segment, the Model 3 has lapped the best-selling cars from Mercedes and BMW. In the third quarter, the Model 3 outsold all but a handful of Toyota and Honda cars. Tesla was the first company to sell 200,000 electric cars cumulatively in the U.S., which triggers the gradual phase-out of the subsidy. The \$7,500 credit will drop by half for Tesla on Jan. 1. Model 3 production now appears to be cruising—from the first cars off the line in July 2017, it took about 14 months for the company to build the initial 100,000 Model 3s. At the current rate of production, it will build the second 100,000 in less than six months.

WALMART TO PAY \$65 MILLION TO SETTLE LAWSUIT OVER SEATING FOR CASHIERS



Walmart Inc. has agreed to pay \$65 million to nearly 100,000 current and former cashiers in California who accused the retailer of violating state law by refusing to provide them with seating while they worked. Walmart denied any wrongdoing in the nine-year-old case, which was scheduled to go to trial later this year, in a filing in federal court in San Francisco. The settlement must be approved by a federal judge. In addition to the payout, the company said it would begin providing seating to its cashiers in California. Walmart spokesman Randy Hargrove said "both sides are pleased to have reached a proposed resolution." Lawyers for the plaintiffs did not immediately respond to a request for comment. In the court filing, Walmart and the plaintiffs' lawyers said the settlement, if approved, would be the largest ever under California's unique Private Attorney General Act. The law allows workers to sue their employers on behalf of the state and keep one-quarter of any money that they win.

FEARFUL OF SWINE FEVER, FRANCE PLANS FENCE ON BELGIAN BORDER



France will start putting up fencing along part of its border with Belgium to prevent wild boars spreading African swine fever, a virulent livestock disease that could disrupt Europe's large pig industry. France has been on alert for African swine fever since Belgium detected the virus last month among wild boars a few kilometers from the French border. Belgium decided to slaughter several thousand pigs in its contaminated zone to prevent the virus reaching farm herds, but it is already facing embargos on its pork exports from countries like South Korea and China, which is also grappling with an outbreak of the disease.

11 BABY CORPSES FOUND IN CEILING OF FORMER FUNERAL HOME

Detroit police say the bodies of 11 babies have been found hidden in a drop ceiling of a funeral home that the state of Michigan closed six months ago for violating rules. Authorities say construction workers found the infant corpses at the Cantrell Funeral Home. Eight were stored in a cardboard box and three were found in separate garbage bags that were stuffed into one casket. The Wayne County Medical Examiner took custody of the remains after the discovery. Jameca LaJoyce Boone, who was the funeral home's manager for a year before it was shut down and had her individual mortuary licence revoked, said she had no idea what was going on with the baby's bodies. "I didn't know anything about that," said she. "I really don't know how that could even have happened. I don't know how long that's been going on there... it's very unfortunate and they definitely need to find out who put them there." Detroit police have ordered a search of the building to ensure there are no additional bodies inside. Inspectors shuttered the business in April for violations of decomposing remains and deplorable conditions. The funeral home's license was suspended after rotting corpses were discovered in a squalid back room and nonrefrigerated garage. During a previous surprise inspection, Cantrell Funeral Home was cited for 10 corpses lying on tables. Inspectors claim many of the bodies had been left decomposing for months.



Brigade Commander Hosts Senior Leader Off-Site

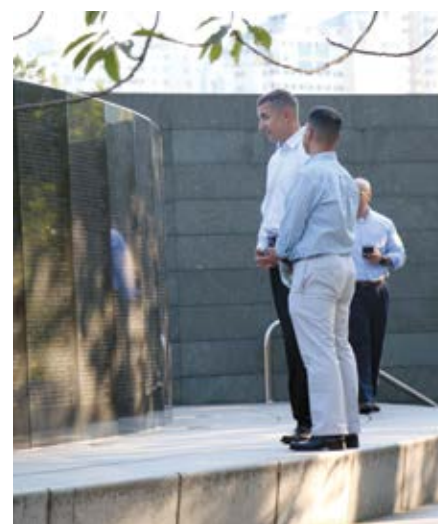
Photos by William Wight
65th Medical Brigade Public Affairs Office



The 65th Medical Brigade Commander, Col. Derek Cooper, recently hosted a Leadership Off-Site October 1-4 at the Westin Chosun Hotel in Busan, South Korea. Brigade senior leaders openly discussed revising the Brigade Mission, Lines of Efforts, effectively communicating as leaders with Arbinger training, trends dealing with the Sexual Harassment/Assault Response Program and



Equal Opportunity as well as team building exercises and tours of the United Nations Cemetery, Taejongdae Park and a visit to Republic of Korea Army hospital at Gimhae. With the recent turn over across the command team, brigade staff sections and direct reporting units joined the commander and command sergeant major with the goal of building the team and validating the Brigade's operational approach and priorities.



Dental Teams Conduct Operation Viper Strike

Photos by William Wight
65th Medical Brigade Public Affairs Office



Soldiers from the 618th Dental Company (Area Support) continued to train and learn dental equipment load plans, validation and deployment of equipment to the field. Last month the Viper Strike train-up week began with phase-training and retraining new unit members and providers



on their equipment by setting up field dental tents at U.S. Army Garrison Humphreys. Despite the inbound typhoon like weather, the Dental treatment teams honed their skills by providing basic dental treatment for Carius Dental Treatment Facility patients in their field tents.



Dark Knight Challenge

Photo by Lt. Col. Marc Welde
United States Army Medical Materiel Center-Korea



563rd Medical Company held another iteration of the "Dark Knight Challenge", a physical readiness event which was held at various points throughout Camp Walker. The event incorporated fitness, wit and battle-focused tasks. The company was also selected as the small category winner of the Eighth United States Army Award for Maintenance Excellence for 2018. The company will move on to compete at the USARPAC competition later this month.



NCOA

NON COMMISSIONED OFFICERS ASSOCIATION

The Voice of Today's Enlisted
The Vanguard of All Services



Our Story



The Non Commissioned Officers Association, more commonly known as NCOA, is a strong voice on Capitol Hill and with the Veterans Administration. Our members and chapters around the world are making a difference in their local communities.

We encourage you to visit our website and see the great benefits and advantages of being an NCOA member. Today NCOA remains a vital fraternal, benevolent, non-profit organization and acts as a conduit between the military and civilian communities in local areas and promotes positive community relations.



Our Mission



The NCOA was established in 1960 to enhance and maintain the quality of life for noncommissioned and petty officers in all branches of the Armed Forces, Active Duty, National Guard, Reserves, Veterans (separated and retired), widows, and their families.



Our Member Benefits And Benevolent Programs



The NCOA offers its members a wide range of benefits and services designed especially for enlisted service members and their families to include Finance, Legal Services, Special Educational Discounts, Mentoring through Corporate Partnerships, Entertainment Discount Program, Exclusive Travel Discount Program and Health Care. In addition, our Benevolent Programs include: NCOA Scholarship Fund, Bettys Ross Educational Fund and Disaster Relief Fund.



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121CSH Sharpens Field Hospital Medical Skills

Photos by William Wight
65th Medical Brigade Public Affairs Office

The 121st Combat Support Hospital recently conducted Operation Dragon Den 18. This field exercise enabled the medical staff to prepare for surgical procedures within a field hospital setting and manage a crisis during contingency operations while staying proficient in their field medical tasks. Various scenarios of a Mass Casualty Exercise Training Event were used to test the medical



professionals. One scenario involved a Military K-9 (simulated). Live patients were incorporated into simulated casualties as part of the MASCAL Event. (WARNING: All blood and injuries are simulated for training purposes.)



Retirees to Gain access to Wider Menu of Dental Plans

Story By Tom Philpott
Stars and Stripes



Sometime in October military retirees can begin to review online the various features and monthly premiums of dental plan options for replacing their Tricare Retiree Dental Program (TRDP), which is set to expire after Dec. 31.

Congress voted two years ago to end the TRDP and to allow 3 million military retiree households access to the same menu of dental plans administered for federal civilian employees by the Office of Personnel Management (OPM).

Features of those 10 or more plans, and premiums to be charged in 2019, will be unveiled by OPM and the Defense Health Agency next month. After military retirees and their families decide on what plan is best for them, they will have to enroll in their picks during an open season to run from Nov. 12 through Dec. 10.

Participants will be able to choose either self-only coverage, self-plus-one coverage or self-and-family coverage with premiums adjusted accordingly.

Coverage under the new dental plans will begin January 1.

Military retirees also will be eligible, along with other Tricare beneficiaries including families of active-duty personnel, and drilling reserve component person-

nel and their families, to buy into one of four vision insurance plans offered to federal civilians. They must be enrolled in a Tricare plan, however.

The combined package opening to military retirees and their families, and the vision care option for most other Tricare beneficiaries, is also called the Federal Employees Dental and Vision Insurance Program (FEDVIP).

Patrick Grady, chief of the Tricare Health Plan, has been coordinating the FEDVIP launch for Tricare beneficiaries with OPM officials for months. It's important that military retirees understand, Grady said, they will need to take an active role in transitioning from their expiring dental plan to one of the FEDVIP options.

"They will need to get engaged during Open Season, starting the 12th of November, and choose which plan is right for them and their families. This isn't a passive approach anymore. But we're excited about the options they'll have to choose from," Grady said.

Approximately 840,000 military retiree households, a total of 1.7 million beneficiaries, now rely on the Tricare Retiree Dental Program for dental insurance. It's been the sole military-backed dental coverage offered to retirees over the years and Delta Dental has serviced the contract for the past five years.

When Congress decided to give military retirees access to the same robust menu of dental options as federal civilians, it also directed the Defense Department to work with OPM to offer vision plan insurance options, and not only to retirees but to other Tricare beneficiaries.

As with the TRDP, premiums and cost shares, including deductibles and co-payments, will be set so that FEDVIP enrollees fully cover the program costs. OPM administers the menu of plans but the government doesn't subsidize its benefits.

Military participants will be able to pay their premiums through a post-tax allotment from base or retirement pay.

The real advantage to be gained for military retirees and their families in transitioning to FEDVIP will be in the variety of plans open to them, Grady said. When dental plan features and premium costs for 2019 are announced next month and posted at tricare.benefeds.com, he said, retirees and families will have time to determine which plan best fits their dental needs and budget.

"I can speak from a personal perspective because I am enrolled in TRDP but I'm also a federal employee with a family of seven children," said Grady. "I would have loved to have the type of options that are coming in October given the amount of investment I put into my own children's teeth.

"I would have had to pay a little more to get the orthodontic coverage that was best for me, but the availability of more choices would have been appealing."

Dental benefits for active-duty members and their families will continue to be provided by military treatment facilities or through separate contracts managed by the Defense Health Agency. Reserve component members and their families also will continue to purchase a premium-based Tricare dental plan. Both the Active Duty Dental Program for service members and the Tricare Dental Program for active-duty family members, and reserve component members and their families, are administered by United Concordia.

Tricare beneficiaries currently have modest vision coverage, usually restricted to periodic routine eye exams depending on Tricare plan and beneficiary status. Information on current Tricare vision care can be found online at Tricare.mil/vision. Free vision care on base usually had been available only to active-duty

personnel, depending on policies set by the military treatment facility.

For 2019, however, roughly 5 million military households — 7.8 million Tricare beneficiaries — will be eligible to purchase vision care insurance through FEDVIP. Information on new vision care options for military beneficiaries also will be available next month at tricare.benefeds.com.

Before military retirees and their families shop for a dental plan, they should verify that their personal information in DEERS, the Defense Enrollment Eligibility Reporting System, is up to date with recent life events, including new mailing addresses and changes to marital status or number of dependents, Grady said.

He said he and his staff have worked closely with OPM officials to ensure a smooth transition of plans for beneficiaries, particularly dental plan options.

"We have done a lot of preparatory work, mailed out postcards to our beneficiaries.

We have a great communication plan," Grady said. "To get the word out we've engaged a lot of different agencies and attempted to leverage all kinds of communication [tools] to make sure our folks understand."

Congress didn't estimate program costs in deciding to transition Tricare beneficiaries to FEDVIP. However, the Congressional Budget Office predicts a cost-savings to government of \$35 million through fiscal 2026, with

some of that offset by implementation costs to educate and transition Tricare users.

The Congressional Research Service, in a recent report, said FEDVIP dental plans typically include: 100 percent coverage of in-network preventive services; no deductibles when using in-network dentists; no waiting periods for major dental procedures such as crowns, bridges, dentures or implants; and orthodontic coverage, under select plans, without a 12-month waiting period or an age limit.

FEDVIP vision plans typically include: routine eye exams and vision correction without referral requirements; low vision exams and aids; eyeglass frames, lenses, and contact lenses; lens options (e.g., special coatings, tinting, etc.), and discounts on laser eye surgery.

Military retirees and other Tricare beneficiaries are urged to check the Tricare site frequently for information updates. They also can sign up there to receive alerts when new information is added to the site.

The real advantage to be gained for military retirees and their families in transitioning to FEDVIP will be in the variety of plans open to them. They will have time to determine which plan best fits their dental needs and budget.



Humphreys Garrison Hosts *Information Fair* for Military Community

Story by Sameria Zavala
U.S. Army Garrison Humphreys Public Affairs Office

The U.S. Army Garrison Humphreys Information Fair was conducted Sept. 8, at the Downtown Humphreys One Stop building, to provide the military community with information from 20 venues, including local hospitals, private organizations, Department of Defense Dependent schools, and local businesses.

The Retiree Appreciation Day and the NAF (Non-Appropriated Fund) and Army Community Services Hiring Fair kicked off the same day, with about 90 retirees and their spouses



participating in the RAD activities.

Humphreys, historically known to the local community as K6, is rapidly growing. New service members, contractors and their families are arriving every day. With that, comes the garrison's responsibility to make sure that everyone maintains their readiness and quality of life.

Col. Scott Mueller, Humphreys' garrison commander, expressed his excitement on the consistent growth of the installation and the success of the event.

"This event is something I know that the Humphreys community needs. The one constant here is change. The idea for this was to provide a one-stop for our community to get everything in one place at one time," said Mueller.

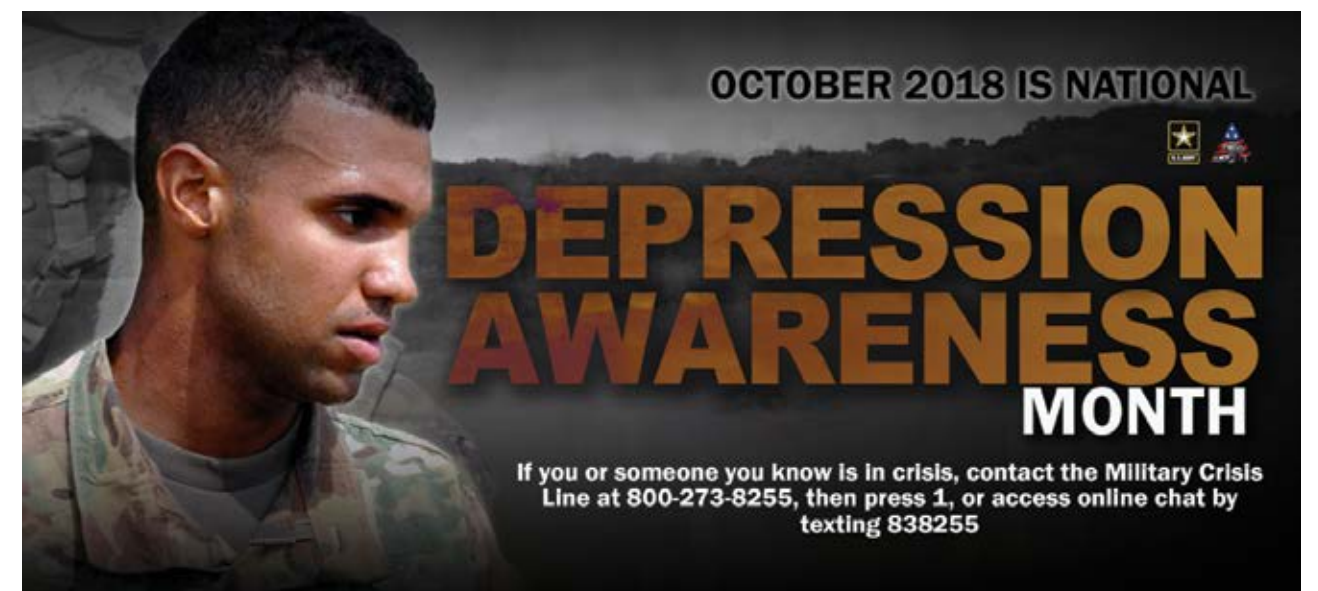
Aubrie Hughes, recreation branch chief for Family and Morale Welfare and Recreation, and coordinator for the event, was pleased with the attendance and the support from the local community.

"From a customer's perspective, this is a good opportunity for them to leave with more knowledge," said Hughes. "When you come overseas, you don't know where to go or who to talk to; it's a whole new environment. I think this event might make them (the Humphreys community) feel more at home and that is always our goal."

Planning for the next Info Fair is already underway.



Retirees participate in the Humphreys Retiree Appreciation Day at Carius Dental Clinic. (Photo by Sameria Zavala, USAG Humphreys PAO)



Telemedicine

— Provides — Higher Level Assistance in a Medically Austere Environment

Story by Capt. Marion Jo Nederhoed
35th Air Defense Artillery Public Affairs Office



Soldiers at CTF-Defender brief the 94th Army Air and Missile Defense command team, Brig. Gen. Michael Morrissey and Command Sgt. Maj. Eric McCray, on the new telemedicine program for Soldier care that has been set up at the site.

Telemedicine has not only the potential, but has been demonstrated to save lives in a medically austere environment. Medical providers from the 35th Air Defense Artillery Brigade are prepared to provide essential routine and emergency medical care in South Korea's complex operational environment.

Ground transportation is highly restricted at Combined Task Force (CTF) Defender and MEDEVAC flight times are at the edge of Golden Hour radius for D-2

Battery, 2-1 Air Defense Artillery Battalion located at the remote site near Camp Carroll, South Korea.

Telemedicine is a videoconference platform for medical providers to communicate with combat medics and patients where no higher level of medical care exists. Whether it is routine care or in the event of



Capt. Vanderburg leads a telemedicine training session with medics Spec. Yeon Kyoung, Pvt. 1st Class Madelyn Blundell on the telemedicine computer system.

heightened tensions, a prolonged field care environment, or if specialty care needs to provide guidance, having the ability to provide a stable form of communication is crucial for a medical provider.

Capt. Aaron P. Vanderburg from Chino Hills, California is the 2-1 ADA physician assistant. He has worked since May 2018 to establish telemedicine at the site. The unit has been providing continuous medical support to the site since it stood up in April 2017 and this program now enhances the medical services available at CTF-Defender.

"Telemedicine allows medical providers the ability to assess and guide medics in this austere environment," Vanderburg said. "The process took several months to get fully operational. It required establishing the proper computer hardware, software, and network connections. Additionally, my platoon had to gain network access and be trained and proficient on all software platforms."

In the event of an injury or illness, a medic first evaluates the casualty. Once it is determined that they

have a health issue that cannot be stabilized or treated at their level, the medic has the capability to perform a telemedicine consult with a medical provider for assistance.

"Telemedicine grants the medical provider both audio and visual data to assess the patient and guide the medic," continued Vanderburg. "After the assessment, the medical provider will develop a treatment plan for the casualty. If necessary, they can assist in arranging transportation and medical assets at the next level of health care."

In a prolonged field care environment, medics may have to monitor complex trauma patients for an extended period of time. Telemedicine helps bridge this gap by guiding combat medics through more advanced lifesaving interventions, patient monitoring, and data collection that will permit medical teams to better prepared to receive an injured or ill casualty.

Capt. Vanderburg said that he has already been able to treat several Soldiers through Telemedicine.

“

Telemedicine grants the medical provider both audio and visual data to assess the patient and guide the medic."

— Capt. Vanderburg

As the process becomes more polished, they will be able to set up daily medical appointments through Telemedicine.

The unit is actively increasing Telemedicine capabilities at CTF Defender. Currently, they are working with 65th

Medical Brigade to establish Telebehavioral Health capabilities on site. This will provide Soldiers at CTF-Defender the ability to seek routine and immediate care. Additionally, we are in the process of establishing an additional private setting standing up an office on site.

"Currently, the system is fully operational. We expect challenges as we further develop Telemedicine capabilities at CTF Defender," said Vanderburg. "Additionally, maintaining the Soldier training and familiarity with the process of Telemedicine as Soldiers join and leave the Guardian Battalion will be a challenge for us. Despite this, my team welcomes any adversity that the future holds for us."

The 2-1 ADA's mission is unique where there is highly limited or no U.S. Military medical assets available. Vanderburg said the lessons learned from establishing Telehealth at CTF Defender can be applied to other locations in the future.



Childhood Obesity: *Growing Epidemic*

Courtney Dock
Army Medicine

September was a month of school starting, football season kicking off, and the start of fall. It was also the month medical professionals used to bring awareness to a trending epidemic in children: Childhood Obesity.

According to the Center for Disease Control, about 1 in 6 children in the United States has obesity and the health effects can last a lifetime.

By The Numbers

"If you look back to the 70s

and 80s, the percent of childhood obesity was around 5 percent," said Navy Cmdr. (Dr.) Jill Emerick, pediatrics subspecialty service chief, Walter Reed National Military Medical Center. "The most recent data of 2015 and 2016, we see that has increased to 18.5 percent in children ages 2-19."

Obesity is defined by more than just the number measured on the scale. It takes into account body mass index, which is measured to determine childhood overweight and obesity. Overweight is defined as a BMI at or above the 85th percentile and below the 95th

percentile for children and teens of the same sex and age. Obesity is defined as a BMI at or above the 95th percentile.

"Childhood obesity is one of the fastest growing health epidemics, if not the most, affecting our nation's children that we know of today," said Air Force Lt. Col. (Dr.) Candace Percival, pediatric endocrinologist, Brook Army Medical Center. "It's far reaching. It reaches children of all social economic classes. It affects all ethnicities and genders."

Childhood obesity is preventable. Emerick said the sooner the

health issue is identified the better, so parents and the health care provider can begin a treatment plan.

"It's really important to be aware of the issue," said Emerick. "We as pediatricians and parents want to stay on top of it because childhood obesity can increase your chances of health issues and concerns as an adult."

Emerick said the topic is sometimes hard to talk about with societal stigmas attached to the word obese. However, it's important for parents and pediatricians, both, to be open to the conversation.

Prevention

It's important to realize obesity is multi-factorial said Percival. There's not one single reason someone becomes overweight or obese. The best way to prevent obesity is taking a holistic approach to healthy living.

"The focus should be on healthy living versus dieting," said Percival. "Families should embrace habits that are lifelong and not temporary changes. The goal is to focus on

are engrained over a long period of time we have to overcome said Emerick.

"Childhood obesity can be managed by making healthier choices as a family," said Emerick.

The "95210, Let's Go!" resource page recommends setting goals with your children and participating with them. The goal is to lead by example and set a family challenge.

"Families who work together as a family unit and commit to change tend to do much better with success," said Percival.

Long Term Consequences

The long-term consequences of childhood obesity are almost unmeasurable for our society and some effects are irreversible. Children with obesity are at a higher risk for having other chronic health

and that's shocking."

Children with obesity can be bullied and teased more. They are also more likely to suffer from social isolation, depression and lower self-esteem.

"The ramifications of obesity on wellness can be a change in mood, a higher rate of eating disorders and anxiety," said Percival. She added, another issue is developing an unhealthy relationship with food causing guilt or shameful eating habits. And our military kids are not immune to this epidemic.

"There's a myth," said Percival. "The myth is that our military lifestyle protects our kids, but military kids are on par with their peers."

According to the CDC, in addition to the medical costs of obesity-related issues, data shows implications of obesity on recruitment by the armed forces. During

Children with obesity can be bullied and teased more. They are also more likely to suffer from social isolation, depression and lower self-esteem.



the lifestyle change toward healthy habits."

Both doctors recommend following the "95210, Let's Go!" method. The goal is for children to get 9 hours of sleep, 5 servings of fruit and vegetables, 2 hours or less of screen time, 1 hour of physical activity, and 0 sugary beverages each and every day.

The goal should be to establish healthy behaviors early so they become healthy behaviors for a lifetime versus bad habits that

conditions, such as asthma, sleep apnea, bone and joint problems, and type 2 diabetes.

"What we see a lot more now and was unheard of 30 years ago is an increase in Type 2 diabetes," said Emerick. "In childhood, we used to only see Type 1 and now about a third of cases are Type 2

the 2007-2008 study, more than 20 million potential recruits were ineligible for enlistment due to being overweight.

"It's an important topic for all of our children," said Emerick. "But especially for our military. Our military families are a source of where we get our future force."



Here's the Army's Tip Sheet for Acing Its New Combat Fitness Test

Story by Matthew Cox
Military.com

A rmy fitness officials recently released the manual for the upcoming Army Combat Fitness Test, including tips for pleasing graders on each event.

Beginning in October, the service will conduct a large field test of the ACFT, involving soldiers from 60 battalions across the active-duty, National Guard and Reserve components.

"While the ACFT is backed by thorough scientific research and has undergone several revisions, there

are still details that have not been finalized," according to the ACFT Field Testing Manual released Sept. 6. "The purpose of the Field Test is to refine the field administration and scoring of the ACFT."

The six-event ACFT is scheduled to officially replace the Army Physical Fitness Test in October 2020.

In addition to test preparation, equipment lists, event procedures and administrative guidance, the manual provides advice for graders scoring each event.

"There are no test event re-starts. Incorrectly performed rep-

etitions will not be counted," the manual states.

Here is a look at what graders will likely be looking for on each ACFT event:

Strength Deadlift

This is a three-repetition maximum deadlift to test muscular strength. Graders will terminate a record attempt (which counts as one of two record attempts) if the soldier drops or bounces the weights off the ground or rests in the down position. Resting means

no continuous effort is being made to lift the weight.

Standing Power Throw

This event involves throwing a 10-pound medicine ball as far as possible over the head and to the rear. The soldier must make one practice throw and two record throws. A record attempt will not count if a soldier steps on or over the start line during a throw. This is a fault, and the throw will be repeated. Two faults in a row will count as a record attempt, and the soldier will receive a "0" for that record attempt.

Hand-Release Pushups

This event forces the soldier to go all the way to the floor and raise his/her hands before coming back up again. A repetition will not count if the index finger is outside the outer edge of the shoulder, feet are more than a boot's width apart, the soldier fails to simultaneously raise the shoulders and hips (the whole body) off the ground in a straight alignment from the top of the head to the ankles, or the soldier bends or sags at the shoulders, hips or knees while in the front leaning rest position. After a warning, the test event will be terminated if the soldier lifts a foot off the ground, lifts a hand off the ground or rests on the ground or in any position other than the front leaning rest position.

250-Meter Sprint-Drag-Carry

This is five different events within one event: a 50-meter sprint; a backward 50-meter drag of a 90-pound sled; a 50-meter

movement; a 50-meter carry of two 40-pound kettle bells; and a final 50-meter sprint. Graders will call soldiers back to the start line or the 25-meter turn line to correct violations in performance to include: failure to touch the line with a hand and foot while sprinting or doing laterals or failure to pull the entire sled across the 25-meter or start line.

A soldier's body must continue past the line pulling the sled backward until the entire sled crosses the line. The soldier may then turn the sled. Failure to pull the entire sled across the start line before

fails to return to a straight-arm position; has arms fully extended in the down position or pushes off the post, ground or bar with back or foot to establish momentum to lift the knees. Incidental contact with the ground, post or bar is not penalized if the grader deems the soldier has gained no advantage. The event will be terminated if the soldier drops from the bar or rests on the ground.

Two-Mile Run

The ACFT retains the two-mile-run portion of the APFT, which is designed to measure aerobic and



beginning the laterals or throwing or tossing the kettlebells on the ground will also result in violations in performance.

Leg Tuck

A soldier hangs perpendicular to the pull-up bar and brings his knees up to his elbows and back down again for one repetition. A repetition will not count if a soldier: fails to touch both knees (or thighs) to both elbows, swings or twists to establish momentum to lift the knees,

muscular endurance. Soldiers must complete the event without any physical help. Soldiers may pace another soldier or be paced by another soldier. Leaving the course at any time during the event will cause the event to be terminated.

After completing all six events, soldiers must review and sign their scorecards, the manual states.

"Any discrepancies must be resolved at the test site," it adds. "Requests for reconsideration will not be permitted after the scorecard has been signed and turned in."

EFMB ON THE MOVE

Photos courtesy of
Maj. Louie Pineda
and Sgt. 1st Class
Clodomiro Espinoza



The Expert Field Medical Badge was established in June 1965 as a Department of the Army special skill award recognizing the exceptional competence and outstanding performance by field medical personnel. The badge consists of a litter placed horizontally behind a caduceus with the cross of the Geneva Convention.

Guidance for conducting the EFMB testing is governed by the Army Medical Department Center and School, U.S. Army Health Readiness Center of Excellence in Joint Base San Antonio, Texas.





task without giving any feedback. Simply performing steps in the wrong order, forgetting to check a pulse or not marking a T on a casualty's forehead after applying a tourniquet will cause a Soldier to fail a task. Soldiers who fail a certain number of tasks from any category are eliminated immediately.

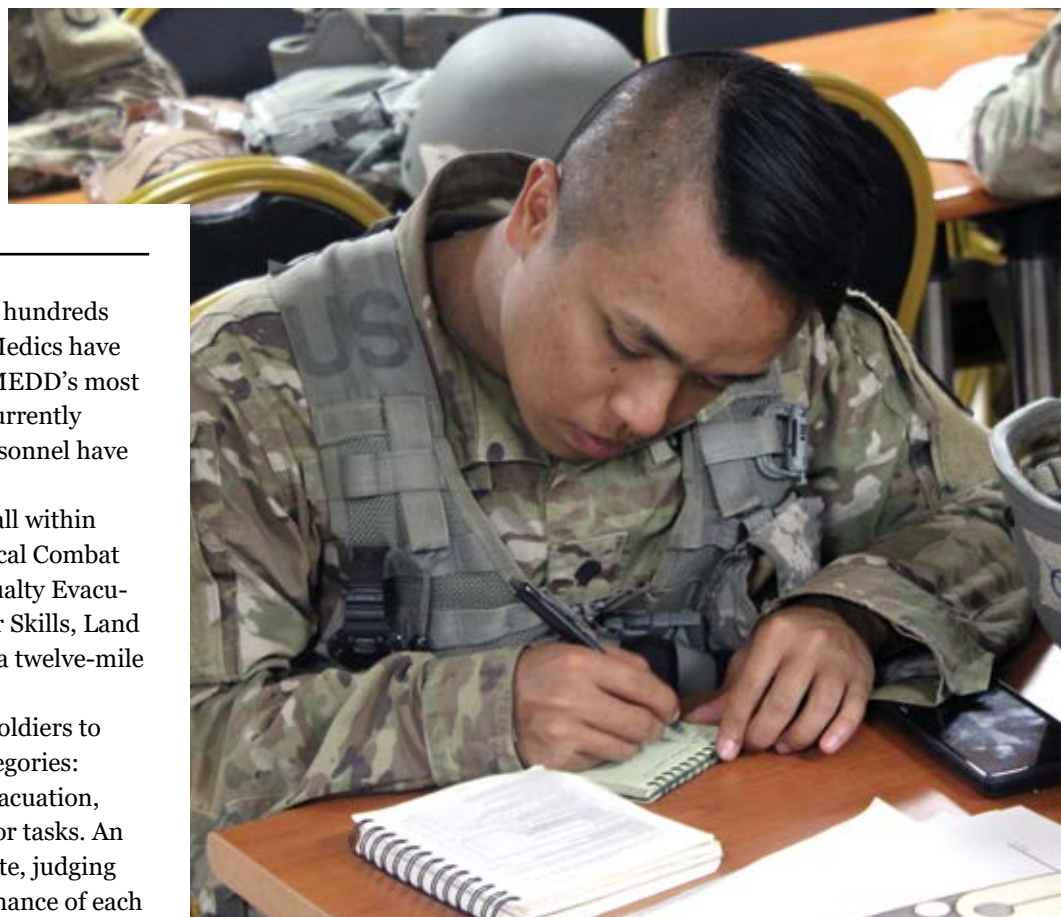
This year, testing began with 205 candidates and culminated with 18 graduates earning the coveted badge. In addition to receiving their EFMB, the top three graduates also received the Army Medical Department Expert Field Medical Badge Coin.

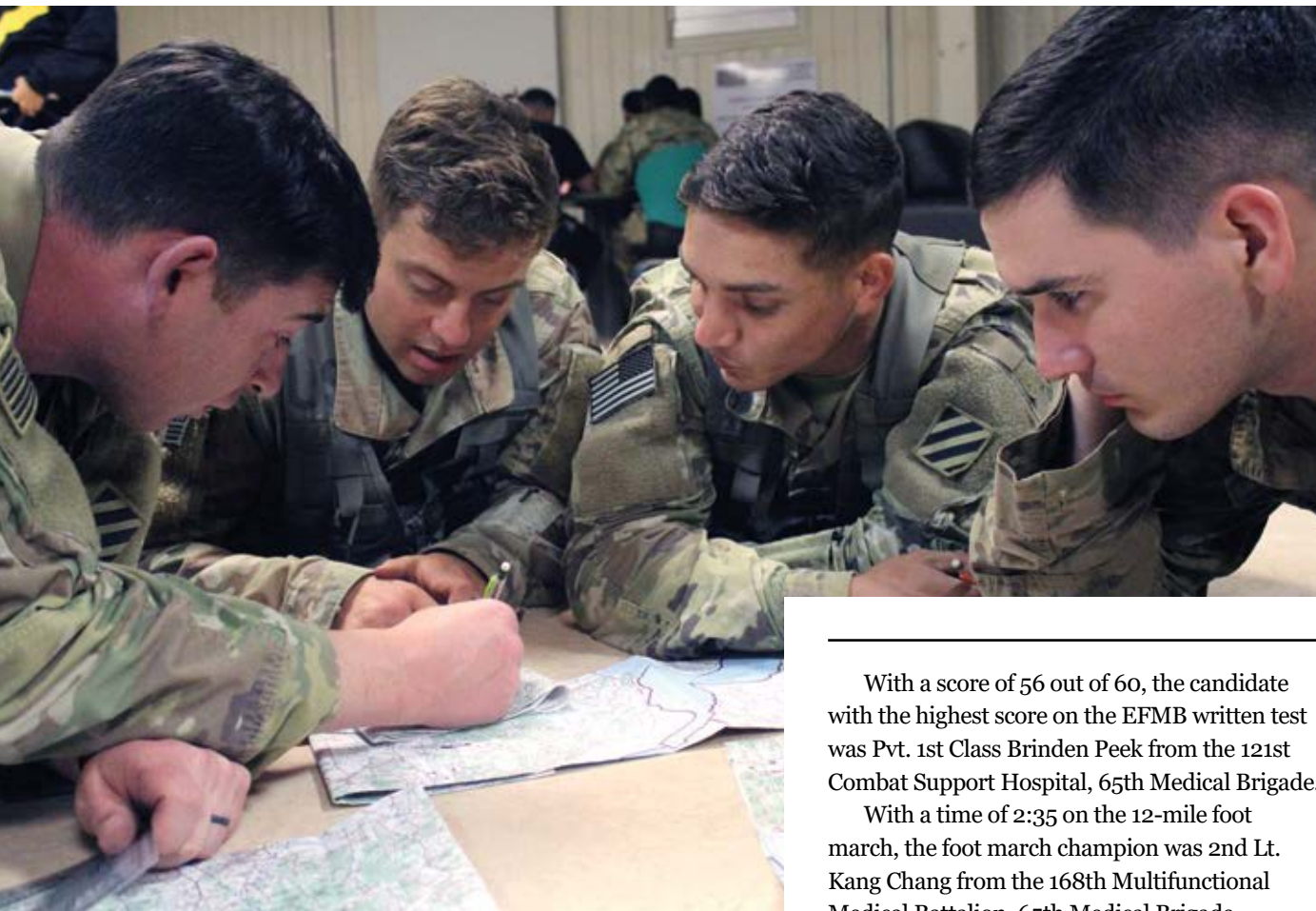


Over the past five decades, hundreds of thousands of Soldier Medics have attempted to earn the AMEDD's most prestigious peacetime badge. Currently less than 10% of all AMEDD personnel have earned the EFMB.

Tested events of the EFMB fall within one of the following areas: Tactical Combat Casualty Care, Medical and Casualty Evacuation, Communications, Warrior Skills, Land Navigation, a Written Test, and a twelve-mile Foot March.

Three testing lanes require Soldiers to complete 42 tasks from four categories: tactical combat casualty care, evacuation, communication skills and warrior tasks. An evaluator shadows each candidate, judging their reactions and their performance of each





With a score of 56 out of 60, the candidate with the highest score on the EFMB written test was Pvt. 1st Class Brinden Peek from the 121st Combat Support Hospital, 65th Medical Brigade.

With a time of 2:35 on the 12-mile foot march, the foot march champion was 2nd Lt. Kang Chang from the 168th Multifunctional Medical Battalion, 65th Medical Brigade.

With the most Go's from the week's evaluations was Sgt. Sung Seo from the 35th Air Defense Artillery Brigade.



68th Annual 38th PARALLEL HEALTHCARE TRAINING SYMPOSIUM

Hosted By: 65th Medical Brigade/MEDDAC-K

OCT. 29 - NOV. 2, 2018

T H E M E

"Military Health System Support in Multi-Domain Operations"

Sub-themes include: extended field trauma care, modular field hospital, expeditionary medic, emergency preparedness/consequence management, and CBRN.

The event will kick off with the plenary session on 29 OCT at the Dragon Hill Lodge in Yongsan. From 30 OCT-2 NOV, we'll be doing split operations. The medical, nursing and behavioral health tracks will remain at the DHL on Yongsan. The dental, veterinary, and enlisted tracks will be at the Morning Calm Conference Center at Camp Humphreys.

Contact Major Michael Villacarlos at DSN 315-737-1684 or email at Michael.r.villacarlos.mil@mail.mil for more information.

To register, visit: <https://www.korea.amedd.army.mil/event/38PHTS2018/index.html>



Other graduates were:

- 2nd Lt. Claire Barthel from the 168th Multifunctional Medical Battalion, 65th Medical Brigade
- Sgt. James Binswanger from the 1/3 ABCT, 2ID/RUCD
- Maj. Andrew Ciccolini from the 106th Veterinary Detachment, 65th Medical Brigade
- Capt. Shawn Fry from the 168th Multifunctional Medical Battalion, 65th Medical Brigade
- 1st Lt. Hannah Jones from the 210FAB, 2ID/RUCD
- Spec. Esther Kim from the 35th Air Defense Artillery Brigade
- Sgt. Haeseung Lee from the 35th Air Defense Artillery Brigade

- Capt. Colin Massey from the 1/3 ABCT, 2ID/RUCD
- Spec. Michael Ochoa from the 168th Multifunctional Medical Battalion, 65th Medical Brigade
- 1st Lt. Kelly Pace from the 121st Combat Support Hospital, 65th Medical Brigade
- 1st Lt. Matthew Perdue from the 2SBDE, 2ID/RUCD
- Capt. Elizabeth Ressler from the 121st Combat Support Hospital, 65th Medical Brigade
- Sgt. 1st Class John Rowley from the 19TH SFG, SOCKOR
- Capt. Patrick Smith from the Headquarters, Headquarters Company, 65th Medical Brigade
- Pvt. 1st Class Emily Sperling from the 1/3 ABCT, 2ID/RUCD





SECURITY BULLETIN

Office of the Assistant Secretary of Defense – Reserve Affairs

1555 Wilson Blvd., Suite 200

Arlington, VA 22209

(703) 696-1171 x 548

Robert Tizon, Force Protection Officer

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Photocopying of Military Identification Cards



Recent incidents regarding the photocopying of military identification cards and common access cards (CAC), by commercial establishments to verify military affiliation or provide government rates for service, have been reported.

Personnel are reminded that the photocopying of US Government Identification is a violation of **Title 18, US Code Part I, Chapter 33, Section 701** and punishable by both fine and/or imprisonment.



Many military members, family members and DoD employees are unaware of this law. Please pass to the lowest level and include in training for force protection, information security and OPSEC.

FPO COMMENTS: Criminal elements and terrorist organizations place U.S. government identifications as a high value logistical element when planning acts against the U.S. military.

Although commercial establishments are not prohibited from asking for military/government identification, many government personnel and commercial establishments are unaware of the prohibition on duplication of government identification. Unfortunately, there are no safeguards in place to ensure a government identification card won't be counterfeited or "cloned" based on a photocopy by a commercial establishment.

It is recommended that military/DoD personnel provide a state drivers license or other form of photo identification to be photocopied if an establishment insists on a photocopy of the traveler's identification.

***NOTE:** This does not apply to medical establishments (i.e. doctor's office, hospitals, etc...) who are allowed take a copy for the purpose of filing insurance claims; and other government agencies in the performance of official government business.

Should you witness activity that may be criminal or terrorist in nature, contact the Pentagon Force Protection Agency **IMMEDIATELY** at 703-692-2729

CAC Scan App

A new application available for Apple and Android smart phones can decode the 2D barcode on the Common Access Card (CAC).

By scanning the barcode on the front of the card using the app it provides:

- The individual's full name
- Full Social Security Number
- EDIPI/DoD ID number

Preventative Actions

1. Safeguard your CAC at all times.
2. DoD employees must follow DoD directive and not allow organizations / businesses to reproduce (photocopy, scan, or other means) an image copy of the member's CAC. Medical providers may copy the CAC per guidance from DHA. See: https://www.hnfs.com/content/hnfs/home/tn/prov/provider_news/2011_archive1/copy_military_id.html
3. If an individual knows of a non-medical organization possessing an image copy of their CAC, the member should immediately request destruction of the image.
4. Employees should not attempt to use or test the applications on their mobile devices as the barcode information may be sent to an unknown server, stored, and made available for public release.

November 2018
NATIONAL DIABETES MONTH
Take a diabetes risk quiz at: go.usa.gov/xUSx4
diabetes.org

USAF Surgeon General in China: *‘We Have Empowered Our Youngest Airmen to Solve Problems’*

By Maj. Phil Ventura
U.S. Indo-Pacific Command Public Affairs



Lt. Gen. Dorothy Hogg, U.S. Air Force Surgeon General, engages with attendees at the Asia Pacific Military Health Exchange 2018 Sept. 18 after delivering a presentation and answering questions on leveraging change management to improve results in military medical care. Now in its fourth year, the APMHE 2018 is being held in Xi'an, China, and is co-hosted by U.S. Indo-Pacific Command Surgeon's Office and the People's Republic of China, People's Liberation Army Directorate of Medical Services. (Photo by Maj. Phil Ventura, U.S. Indo-Pacific Command Public Affairs)



he U.S. Air Force Surgeon General addressed a multinational audience of medical professionals in Xi'an, China Sept. 18 as part of the Asia Pacific Military Health Exchange 18.

Lieutenant General Dorothy Hogg's presentation, 'Leveraging Change Management to Steer the Air Force Medical Service Towards Zero Harm,' was part of an overall discussion on performance optimization.

"Trusted care is a single-minded focus of continually improving the delivery of safe, quality health care with zero harm," Lt. Gen. Hogg said. "It is a culture that is always learning and improving through continuous process improvement to identify errors before they reach our patients."



In her remarks, the general acknowledged that while delivering quality health care has always been the goal of the U.S. Air Force Medical Service, research has found that the same errors often re-occur; an issue that's not exclusive to military medicine.

"If human errors were a disease, it would be the third leading cause of death in America," the general said.

The week-long APMHE, attended by more than 600 participants from 30 countries and international organizations, offers a range of workshop sessions de-

Members from 30 nations and international organizations gather for the Asia Pacific Military Health Exchange 2018 Sept. 17 in Xi'an, China. The weeklong exchange is comprised of a range of workshop sessions focused on issues related to global health and military medicines, with an overarching theme of "Challenges & Solutions: Strengthening Global Health." The agenda includes plenary and breakout sessions for physicians, dentists, nurses, medical administrators and planners, public health and veterinary medicine professionals. (Photo by Master Sgt. Richard Ebensberger, U.S. Indo-Pacific Command Public Affairs)



signed to foster candid discussion in pursuit of the exchange's theme, "Challenges & Solutions: Strengthening Global Health."

Having identified the challenge for the U.S. Air Force, the general went on to describe a solution: "All of our Airmen have a duty to speak up for safety – this is integrity," Lt. Gen. Hogg said, linking the

Service's approach to care with its core values.

"All of our Airmen are committed to putting safety first – service before self. And all Airmen must remain steadfast in striving to zero harm – excellence in all we do."

Beyond her prepared remarks, the general fielded a range of questions from fellow exchange attendees.

Pressed by one to elaborate on the U.S. Air Force medical community's transformation she replied, "Every Airman, every day, a problem-solver...We have empowered our youngest Airmen to identify gaps, seams, problems, issues and bring them up."

Now in its fourth year, APMHE 2018 is being co-hosted by U.S. Indo-Pacific Command Surgeon's Office and the People's Republic of China, People's Liberation Army (PLA) Directorate of Medical

Services. The event was founded by the United States and previous co-hosts include: Vietnam, Malaysia and Singapore.





Sgt. Haeseung Lee and Sgt. Sung Seo from 6-52 ADA Battalion and Spec. Esther Kim from the 2-1 ADA Battalion are all smiles following the 12-mile foot march and final qualifying event for the Expert Field Medical Badge.

35th ADA Brigade Medics Qualify for the Coveted Expert Field Medical Badge

Story and photos by Capt. Marion Jo Nederhoed
35th Air Defense Artillery Brigade Public Affairs Office



Currently, less than ten percent of all Soldiers in the Army Medical Department (AMEDD) have earned their Expert Field Medical Badge (EFMB).

Recently, 205 candidates began their journey at Warrior Base, Republic of Korea for the "Eighth United States Army 2018 EFMB on the DMZ" in hopes of earning the coveted badge. Six days later 18 graduated (8.8 percent).

Over the past five decades, hundreds of thousands of medics have attempted to earn AMEDD's most prestigious peacetime badge. The EFMB was established in June 1965 as a Department of the Army special skill award recognizing the exceptional competence and outstanding performance by field medical personnel.

The EFMB course requires that Soldiers are physically fit and fundamentally sound in their warrior skills. In preparation for the EFMB, 6-52 AMD Battalion Physician Assistants (PA) Capt. Donald

Hamilton and 2-1 ADA Battalion PA Capt. Aaron Vanderburg developed a rigorous one-week training event to better prepare soldiers for the rigors of EFMB. Within the Brigade, there were 10 slots and over 45 medical personnel. During each EFMB, the Brigade had over 10 soldiers wanting the chance to earn their badge.

"We developed an internal EFMB competition in order to send the highest quality candidate to compete for their badge," said Vanderburg. "Each soldier was graded against their peers and the final candidates were chosen based upon performance."

Eleven candidates from the Brigade were sent to the course this year with three earning their badge, Sgt. Haeseung Lee and Sgt. Sung Seo from 6-52 ADA Battalion and Spec. Esther Kim from 2-1 ADA Battalion giving the Dragon Team an impressive 27 percent pass rate.

Over the past three EFMB events 30 candidates attempted the course, but only six Soldiers earned their badge (20 percent pass rate). Prior to this, there had not been a Soldier in the Brigade to receive a badge in eight years.

"We reviewed the historical data that comprised the tasks soldiers failed the most. From there, we incorporated those tasks with additional ones to build two comprehensive Combat Testing Lanes (CTLs)," Vanderburg said. "In addition to these two lanes, Soldiers received a written test, a land navigation educational block and day land navigation course, and a timed 12-mile ruck march. Prior to this, the respective battalions conducted internal training in preparation for the event."

This was Sgt. Seo's third time competing for the badge.

"I've been here two other times and I have been so close," Seo said. "Land navigation is the hardest part of the course and what got me last time. I'm so excited to have finally made it."

The first two EFMB training events in preparation for the 8A EFMB event were held by the Brigade at



Sgt. Sung Seo celebrates at the finish line with his peers from 6-52 ADA Battalion as he and Sgt. Haeseung Lee and Spc. Esther Kim from the 35th ADA Brigade complete the 12-mile EFMB foot march.



Candidates receive proper instruction on donning a chemical protective mask by cadre Sgt. Ryan Taylor on standardization day.

Osan Air Base and the most current training event was led by 2-1 ADA in August 2018 at Camp Carroll to prepare candidates for competition.

"It was an absolute honor training everyone for this EFMB competition. Congratulations to Sgt. Lee, Sgt. Seo, and Spec. Kim on earning their badges," Vanderburg said. "All of the time, effort and dedication has really paid off. All of my medics within the battalion have great potential and are in prime position to lead from the front to become badge holders during the next EFMB."

DMZ,

a Symbol of Peace and Culture

Courtesy of Korea Tourism Organization



Imjingak Resort

The Demilitarized Zone, more commonly referred to as the DMZ, was set up and agreed upon during the armistice agreement. Roughly 20 years later in the 1970s, North and South Korea met again and agreed on the continuation of the DMZ, effectively protecting the area from human contact for over 40 years. This restriction has only made people more curious about visiting. While travel within the region still remains extremely limited, with some spots only open to special tours, there are many areas which are open to the general public. Visit for yourself to feel the peace of the DMZ.

Culture Blooming from Peace, Imjingak Resort



Built in 2005 in celebration of the Peace Festival, Imjingak Resort is located on an expansive, nearly-100,000m² grassy area. Just 7km from the DMZ, the park's 3,000 pinwheels spin freely in the winds blowing across the Korean peninsula. However, changing this site filled with the coldness and horror of the war and its aftermath

into a symbol of peace and unity required the sincere efforts of many people. In order to change the energy of the land, cultural programs such as concerts and exhibitions were held here, and it has now become a multipurpose park. Every year, many people come to see the beautiful landscape and enjoy the programs available.

Imjingak Resort also includes a small amusement park, Pyeonghwa Land, popular among family tourists. The harsh history of the war will feel distant as you see parents smiling as their children laugh and play. There are 24 rides here, although there are no roller coasters for thrill seekers. Despite its small size, Pyeonghwa Land offers a unique ambiance, not found at any other amusement park.



Imjingak Resort

- Address: 618-13, Majeong-ri, Munsan-eup, Paju-si, Gyeonggi-do
- Directions: Take a taxi for approx. 20 min. from Paju Station (Gyeongui-Jungang Line)
- Inquiries: +82-31-593-4744
- Website: www.pajusisul.or.kr

Pyeonghwa Land

- Address: 148-33, Imjingak-ro, Munsan-eup, Paju-si, Gyeonggi-do
- Operating hours: Summer 11:00-18:30 / Winter 11:00-17:30
- Admission: Adults & Teenagers 30,000 won / Children (ages 2-13) 28,000 won

The Pain of Separation, Odusan Unification Observatory



Odusan Unification Observatory is located in the northern part of the Western Front, atop Odusan Mountain overlooking the meeting point of the Imjingang and Hangang Rivers. Opened to the public in 1992, the observatory has been visited by over 19 million people. As one of the must-visit attractions for reunification tourism, the observatory offers the use of high-powered binoculars for free. While the binoculars will make it seem as though you could take just one step forward and be in North Korea, they also magnify the awareness of how closed off the country is.



In addition to the observation deck, the observatory's basement level 1 through floor four feature exhibition spaces based on a variety of themes. The basement offers fun learning experiences aimed at young visitors. The second floor exhibition hall, Missing My Hometown, is very touching; Korean War refugees unable to return home drew images of their home and life before the war on over 4,000 tiles. The other exhibitions and videos also explain the pain of separation felt in Korea.

While visitors can tour Odusan Unification Observatory freely, it is important to note that due to its location within the Civilian Control Line, all visitors must leave one hour before sunset. The closing time may also change depending on the weather or circumstances on-site.

- Address: 369, Pilseung-ro, Tanhyeon-myeon, Paju-si, Gyeonggi-do
- Directions: Take a taxi for approx. 30 min. from Paju Station (Gyeongui-Jungang Line)
- Admission: Adults 3,000 won / Students (ages 8-19) 1,600 won / Free admission to seniors (ages 65 and older), preschoolers (ages 7 and younger) & people with a disability
- Inquiries: +82-31-945-3171
- Website: www.jmd.co.kr

Aromatic Site, Herb Village



Herb Village, located in Yeoncheon, is a popular attraction among visitors to the DMZ. The vast field of herbs fills one's line of sight, with Imjingang River winding in the distance. The colors of the many herbs are as different as their scents, providing visitors with the perfect aromatic ambiance for relaxation. Enjoy walking through the field, with the various herbs lined up in orderly rows by color, as if a rainbow was taken from the sky and planted here.

The plants growing within the greenhouse will make it feel as if you have stepped into a picture book. As you walk within the warm, herbal-scented air, you will feel a sense of peace and calm. The greenhouse is home to the nation's five oldest olive trees, each over 300 years old, in addition to lemon trees, hydrangeas, and lavender. The greenhouse also features an herb museum and restaurant. Additional attractions at Herb Village include a small pond and stone garden, perfect for photos. If you're lucky, you might even get some friendly photo bombers, in the form of swans and other birds living here.



- Address: 222beon-ji, Buksam-ri, Wangjing-myeon, Yeoncheon-gun, Gyeonggi-do
- Directions: Take a taxi for approx. 16 min. from Yeoncheon Station (Gyeongwon Line)
- Admission:
Regular season: Adults (ages 14 and older) 7000 won / Children (ages 3-13) 4000 won
Winter: Adults (ages 14 and older) 4000 won / Children (ages 3-13) 3000 won
- Inquiries: +82-31-833-5100
- Website: herbvillage.co.kr

Scars of the War, Korean Workers' Party Headquarters

The Korean Workers' Party Headquarters in Cheorwon is a very clear remnant of the Korean War, with its pockmarked walls protecting an open ruin. Originally part of North Korean land after the end of the Japanese occupation, the headquarters were built to strengthen the regime as well as manage the citizens. However, the area was right in the war path, suffering many attacks and bombardments, which left the building as it is now.

In the 1990s, the site was used in a music video by Seo Taiji and The Boys, drawing much attention. These days, the headquarters are used as the venue for a variety of events, including the DMZ Market and cultural performances.



- Address: 3-2, Gwanjeon-ri, Cheorwon-eup, Cheorwon-gun, Gangwon-do
- Directions: Take a taxi for approx. 5 min. from Baengmagoji Station (Gyeongwon Line)
- Operating hours: Open 24 hours
- Inquiries: +82-33-450-4468

Hopes for Reunion, Cheorwon Peace Observatory

Cheorwon Peace Observatory is very popular for its views of the DMZ and North Korean land on the Central Front Line. The observatory also exhibits photographs taken during the Korean War, and displays a miniature of The 2nd Tunnel, so visitors can get a better feeling of life during the war. Despite being located atop a hill, tourists can still visit with ease by taking the monorail for just 2,000 won (adult fare). Another unique attraction near the monorail is the Unification Postbox. Although it's not a real part of the postal system, people still drop in letters and cards with their sincere wishes for the reunification of the two Koreas.



One point to be very careful of at Cheorwon Peace Observatory is restrictions on photography. Due to the Military Facility Protection Act, photographs can only be taken within the exhibition hall on the first floor, at the observatory plaza, southern views and Pilseung Church. Areas prohibited from photography include the observation decks on floors one through three, military facilities (guard post, general outpost & iron railing), and views including the guard post to the east. If you are unsure about what is allowed, just ask before taking any pictures, and be sure to comply with any requests to delete photos you may have taken.



- Address: 588-14, Junggang-ri, Dongsong-eup, Cheorwon-gun, Gangwon-do
- Directions: Take a taxi for approx. 17 min. from Baengmagoji Station (Gyeongwon Line)
- Admission: Adults 4,000 won / Teenagers (ages 13-19) 3,000 won / Children 2,000 won
- Inquiries: +82-33-450-5559
- Website: hantan.cwg.go.kr



Breast Cancer Awareness Month 2018

Story courtesy of Brian Allgood Army Community Hospital Clinical Services Division



One out of every eight women will be diagnosed with breast cancer in their lifetime.

Did you know, that if you have a first degree relative that has been diagnosed, your risk of developing breast cancer nearly doubles? But did you also know that 85% of breast cancer diagnoses have no family history of breast cancer at all?

Brian Allgood Army Community Hospital radiology department wants to help you put your health as a priority by supporting you during “Breast Cancer Awareness Month.” This month, they will start a new walk-in service for patients who wish to get a screening mammogram by extending their regular screening hours for patients and also allowing patients to self-request for an appointment.

If you are a woman over the age of 40, or it has been a year since your last mammogram and you have no abnormal concerns about your breast health, call 737-2273 today and get scheduled.

According to The American Cancer Society, in 2016 there are more than 3.5 million women alive in the U.S. who have a history of Breast Cancer. Breast cancer is the most commonly diagnosed cancer in American women. In 2018 it is estimated that there will be 266,120 new cases of Invasive Breast Cancer diagnosed in women and an additional 2,550 new cases diagnosed in men. Approximately 40,920 women in the U.S. are expected to die in 2018 from breast cancer according to breastcancer.org (2018).

The intent of Breast Cancer Awareness Month, taking place annually in the month of October since 1985, is to raise awareness about the disease and also to raise funds to research causes, prevention strategies, the diagnosis, treatment, and cure of this disease.

So what is Breast Cancer?

Breast Cancer is a disease that occurs when cells in the breast begin to grow out of control, eventually forming a tumor that can usually be seen on imaging or felt as a lump in the breast. It is the most common cancer in women throughout the world and death rates in women for breast cancer are higher than any other cancer besides lung cancer.

What are the types of breast Cancer?

The two types of breast cancer are in situ and invasive. There are two main types of in situ breast cancer: Ductal carcinoma in situ (DCIS) and lobular carcinoma in situ (LCIS) or lobular neoplasm. (DCIS) is a condition in which atypical cells change the normal epithelial cells that line the breast ducts and may expand the ducts and lobules. This type of breast cancer may or may not progress to invasive cancer. Sometimes DCIS grows so slowly that without treatment it may not affect a woman’s health. LCIS is when abnormal cells grow within and expand some of the lobules of the breast. LCIS is not usually a precursor of invasive cancer, but is a strong risk factor for developing invasive cancer.

It is reported by the American Cancer Society (2017) that 80% of all breast cancers are invasive, which means that they have broken through the lobule where they began and have spread to the surrounding breast tissue with the potential of spreading to the lymph nodes. There are up to 21 subtypes of this type of breast cancer but the main four are: Luminal A which makes up 71% of all invasive cases, Luminal B which makes up 12% of all invasive cases, Triple negative which makes

up 12% of all invasive cases, and HER2- enriched which makes up 5% of all invasive cases.

What are the symptoms of breast cancer?

Breast Cancer usually has no symptoms at the early stages of tumor formation which is why screening is so important. Breast Cancer is usually detected on examination before symptoms even occur. Most commonly the first physical sign is a painless lump in the breast. Other less common signs and symptoms include persistent breast pain or heaviness, swelling, thickening, or redness of the skin, and nipple abnormalities such as spontaneous discharge (especially if bloody), erosion, or retraction. Any changes in the breast should be evaluated by a physician as soon as they are recognized. Most masses detected during examination are benign or non-cancerous, but those that are suspected to be cancerous will be biopsied by a medical provider for further analysis.

Who is at risk for breast cancer?

Sadly, everyone is at risk. Breast Cancer can



affect any gender, age, or race; but some groups are at a higher risk. The median age for breast cancer diagnosis from 2010-2014 was 62. Women living in the United States have a 1-in-8 risk of being diagnosed with breast cancer in their lifetime, but women in 1970 had a 1-in-11 lifetime risk. The increased risk over the past four decades is due to longer life expectancy, changes in reproductive patterns, increased hormone use, obesity, and increased detection through screening. Incidence and death rates are the highest among non-Hispanic white (NHW) and non-Hispanic black (NHB) women than any other racial groups. Asian/Pacific Islander (API) women have the lowest incidence and death rates. African American women have the highest breast cancer rates and are more likely to die from breast cancer at any age.

The following conditions also put men women at an increased risk for breast cancer:

- Alcohol
- Tobacco

Environmental Factors

- Radiation
- Environmental Pollutants
- Night Shift Work



Family History / Personal Characteristics

- A Family History Of Breast Cancer
- Inherited Mutations In Brca1 And Brca2, 26% Or Higher Breast Density
- Benign Breast Disease
- High Levels Of Endogenous Hormones
- Tall Height

Reproductive Factors

- Early Age Menstruation
- Having Children Later In Life
- Long Term Usage Of Fertility

Drugs

- Not Breast Feeding
- Post- Menopausal Hormones
- Hormonal Birth Control

Lifestyle

- Obesity
- Sedentary Lifestyle
- Unhealthy Diet

How can breast cancer be prevented?

Early detection is the key to controlling the incidence of advanced Breast Cancer and Breast Cancer related deaths. When breast cancer is detected early and appropriately treated, the chances of curing the disease increase significantly. It is recommended that all women conduct monthly self- breast examinations several days after the menstrual cycle ends, when your breasts are typically less swollen and tender. If you no longer experience menses, choose a day that's easy to remember, like the first or last day of the month. Routine self-exam familiarizes patients with the breast so it is easier to detect changes. Step by step instructions on how to properly do a breast self-examination can be found on breastcancer.org website.

The Centers for Disease Control and Prevention (2018) recommends that women who are 50 to 74 years

old and are at average risk for breast cancer get a mammogram every two years. Breast MRI's are used along with Mammograms for those who are at a high risk.

Some with an increased risk of breast cancer will choose to have chemoprevention or prophylactic surgery. The chemo prevention drugs are mostly used in post-menopausal women to block estrogen from some tissues in the body. A Prophylactic mastectomy for breast cancer is usually chosen by those with a very high risk of breast cancer such as those with a BRCA gene mutation.

What can be done now?

- Learn your family's health history.
- Limit use of hormone replacement therapy.
- Consider breast feeding.
- Adopt a healthy lifestyle.
- Make a routine of checking breasts monthly.
- Speak with a provider about your risk factors especially if you fit in any of the categories listed above.
- Participate in Breast Cancer awareness month events in the local area.
- Encourage friends and family to learn screening and prevention strategies.

Olivier Asselin / Heifer International

CHANGE THE WORLD GIVE GLOBAL

Help people in need around the world by giving to these respected charities through your employee giving program.

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RESTORING SIGHT
TRANSFORMING LIVES
CFC #11849

Compassion
in Jesus' name
CFC #10522

World Vision
CFC #11117

charity.org/cfc

GLOBAL IMPACT

OCTOBER 2018 IS

OVARIAN CANCER

AWARENESS MONTH

79

an estimated one in 79 women will develop ovarian cancer in their lifetime...

24

Every 24 minutes another woman is diagnosed with ovarian cancer in the U.S.

Learn all the facts at: <https://ocrfa.org/>

armymedicine.health.mil

BAACH Establishes 24-Hour Bi-Lingual Medical Advice Line



Story courtesy of Brian Allgood Army Community Hospital
Clinical Services Division

Currently on the Korean Peninsula there is no Nurse Advice Line that currently works from any phone and the toll free numbers for medical advice to the U.S. do not understand the nuances of the Korean healthcare system. Beginning Nov. 1, the Brian Allgood Army Community Hospital introduced the Bi-Lingual Medical Advice Line or BMAL, which now offers 24 hour access to nursing advice and medical translation services.

The BMAL will allow beneficiaries to access a registered nurse by telephone for advice about immediate health care needs. Retirees will also be able to use this service.

The BMAL nurses will let beneficiaries know which hospital is closest, how to get there and what services the facility offers. They can also assist with translating between the Korean provider/nurse and the patient if needed. This is especially helpful after hours when most International Clinics are closed.

The BMAL, will be available at no cost to TRICARE beneficiaries. The nurses will help callers make informed decisions about self-care at home or advise them when to see a health care provider. The Bilingual Medical Advice Line is available 24 hours a day, 7 days a week. The nurses ask a series of questions about a caller's specific concerns to advise when

and how to seek care for an urgent problem or give instruction on self-care at home.

Should I call the BMAL if I think I have a medical emergency?

No. If you believe you have a medical emergency, go to the nearest emergency room or call 911 on post or from:

Casey: 050-3332-9117
Yongsan: 050-3323-9111
K16: 050-3341-6001
Humphreys: 050-3353-7911
Walker: 050-3364-5911
Carroll: 050-3364-5911

Should I call the Bilingual Medical Advice Line if I am unsure if my child or I need immediate care?

Yes, unless you perceive the problem to be life threatening. The Advice Line helps you make informed decisions on when and how to seek care for an urgent problem or provides advice on self-care at home.

How can I reach the Bilingual Medical Advice Line?

Call the Bilingual Medical Advice Line toll-free number 24 hours a day, 7 days a week at 737-BMAL (737-2625).

Will I reach a live person when I call the Bilingual Medical Advice Line?

A person will always answer and stay with you on the call until you get the advice or access to the health care you need.

What kinds of questions will the nurse ask me?

The Nurse will ask general demographic information and then ask questions about your specific concern to best assist you in making informed decisions on when and how to seek care for an urgent problem or to provide self-care at home.

I have TRICARE for Life. Can I call the Nurse Advice Line?

Yes. I always call the clinic directly during duty hours if I have a problem. Can I still call my own PCM?

You can always call your PCM or clinic; the Bilingual Medical Advice Line is just another way to provide you access to health care and advice.

I have a routine question or concern I want to discuss with my PCM. How do I do that?

The Bilingual Medical Advice Line is for your sudden onset or new health concerns or questions. Secure Messaging, allows you to send secure e-mails to your PCM or health care team. If you are an enrolled beneficiary with a PCM and have a question or concern about a non-urgent health issue, contact your Clinic directly or e-mail your PCM securely on TOLSecureMessagings.com.

How will my PCM know I called the Nurse Advice Line and what the Nurse Advice Line advised me to do?

Your PCM will see your previous encounter on your electronic medical record.

ARMY EMERGENCY RELIEF



**...there for those who Serve
Soldiers - Families - Retired Soldiers**

AER provides assistance with:

- | | | |
|---|-----------------------------------|---|
| • Rent/Mortgage | • Funeral Expenses | • Cranial Helmets |
| • Utilities/Deposits | • Vehicle Repair | • Essential Furniture |
| • Food | • Replacement Vehicle | • Car Seats |
| • Dental/Medical | • Rental Vehicle | • Minor Home Repairs |
| • Emergency Travel | • Vehicle Insurance | • Repair/Replacement of basic appliances |
| • Travel fund for relocation (PCS) | • Educational Scholarships | |

Soldiers Helping Soldiers, Donate to AER today!
www.AERHQ.org



Photos Courtesy US Army



AER Form 2 (1/18)

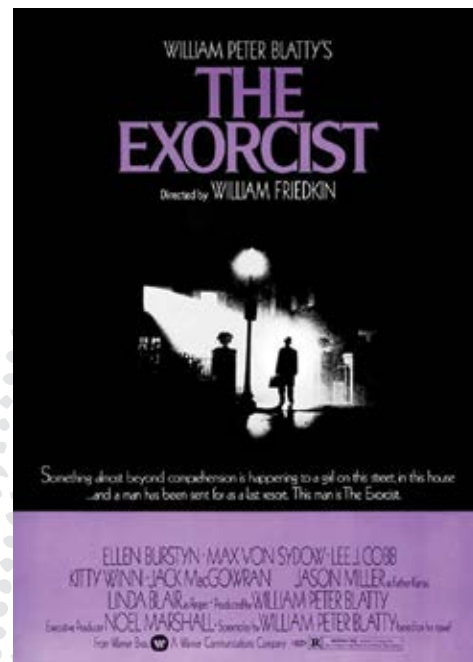
HALLOWEEN MOVIE GUIDE TO FRIGHTENING FILMS

It's Halloween again! To help you enjoy the thrilling time, we've made a list of the most delightfully devilish horror films including both classic and contemporary nightmares that will make you scream even in your dreams.

Psycho

Directed By: Alfred Hitchcock
Starring: Anthony Perkins, Vera Miles, John Gavin
Release Date: June 16, 1960

Psycho is one of the first horror films not built around supernatural occurrences, but instead around a man with a shattered mind and a predilection for killing and women's clothing. It is often credited with "upping the ante" in the horror genre and bringing in a new level of acceptable violence and sexuality in film.



The Exorcist

Directed By: William Friedkin
Starring: Ellen Burstyn, Max von Sydow, Lee J. Cobb, Kitty Winn
Release Date: December 26th, 1973

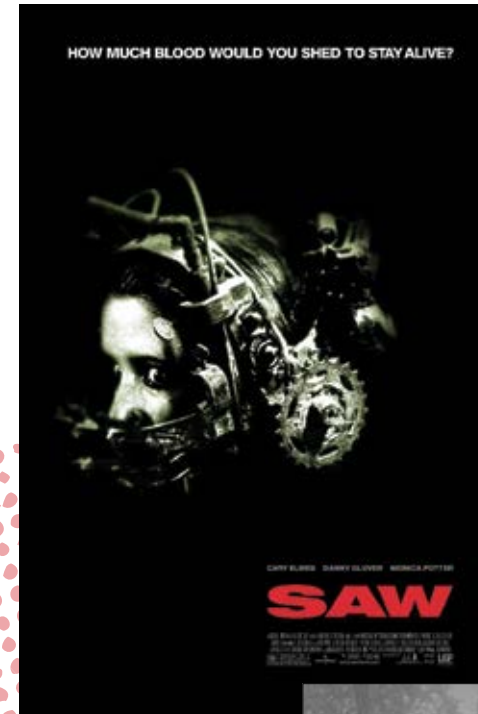
One of the first films to embody pure evil *The Exorcist* is nearly unwatchable for many due to creepy audio trickery and religious undertones. Add in a bit of legend about strange paranormal happenings during the actual filming of the flick and you get an instant classic. It was also the first horror film to be nominated for a best picture Oscar.



Arachnophobia

Directed By: Frank Marshall
Starring: Jeff Daniels, Julian Sands, Harley Jane Kozak, John Goodman
Release Date: July 18th, 1990

Arachnophobia taught audiences that we have nothing to fear, but fear itself...and an onslaught of tiny insects. Frank Marshall's genius was tapping into a very common fear and playing with the notion that just because something is smaller than you, doesn't mean it can't eat you alive.



Saw

Directed By: James Wan
Starring: Cary Elwes, Danny Glover, Monica Potter, Michael Emerson
Release Date: October 29th, 2004

Now on its 7th (and hopefully last) installment *Saw* is still an important film on this list for introducing us to the craziest killer since Hannibal Lecter. Jigsaw proved to filmgoers that a psychotic engineer can be just as scary (if not more) than a madman with a chainsaw.

The Blair Witch Project

Directed By: Daniel Myrick & Eduardo Sanchez
Starring: Heather Donahue, Michael C. Williams, Joshua Leonard
Release Date: July 30th, 1999

This creepy "documentary" was a pioneer of the "found footage" format, which added tangible realism to the film and brought a special psychological element to horror. It scared its way into the hearts of many horror fanatics and is one of the most successful independent movies of all time.



The Cabin in the Woods

Directed By: Drew Goddard
Starring: Kristen Connolly, Chris Hemsworth, Anna Hutchison, Fran Kranz
Release Date: April 13th, 2012

This movie has loads of the guessing games that could leave the horror fan pretty satisfied. This genre bending film mixes comedy with horror to ask pertinent questions about where the genre is heading and where it's been.



Nightmare on Elm Street

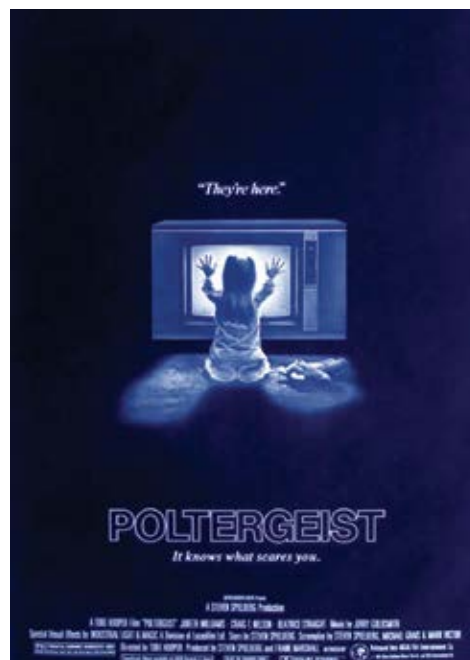
Directed By: Wes Craven
Starring: John Saxon, Ronee Blakley, Heather Langenkamp, Johnny Depp
Release Date: November 9th, 1984

With a more complex plot but an equally savage serial killer *Nightmare on Elm Street* improves upon its predecessors both visually and stylistically. The idea of being hunted while asleep has kept audiences in fear of the dark for decades since the movie's original release.

Poltergeist

Directed By: Tobe Hooper
Starring: Craig T. Nelson, JoBeth Williams, Beatrice Straight
Release Date: June 4th, 1982

With a little bit of Spielberg magic and one very creepy little actress, *Poltergeist* walked the line between thriller and horror with a deft cunning that is unmatched in the genre. It also cemented ghosts in the horror history books as a formidable foe for both young and old.



The Grudge

Directed By: Takashi Shimizu
Starring: Sarah Michelle Gellar, Jason Behr, Clea DuVall
Release Date: October 22nd, 2004

The Grudge is the Hollywood remake of *Ju-on*, a 2002 Japanese supernatural horror film written and directed by Takashi Shimizu. As the poster shows, the film has strong creepy imagery throughout a nonlinear sequence of events. The film was followed by two sequels, *The Grudge 2* (2006) and *The Grudge 3* (2009).



Alien

Directed By: Ridley Scott
Starring: Tom Skerritt, Sigourney Weaver, Veronica Cartwright, Harry Dean Stanton
Release Date: May 25th, 1979

Ridley Scott's entry into the horror genre showed us that fear isn't restricted to earth alone. Part sci-fi, part horror, *Alien* used quite possibly the scariest looking creature ever created to make us cower at the thought that we may not be alone in the universe.



DOMESTIC VIOLENCE

AWARENESS MONTH

Deciding to report domestic abuse is difficult. Victims of domestic abuse can feel confused, alone or afraid to get help.

National Domestic Abuse Hotline at 800-799-SAFE (7233)



EXPLODING VAPORS

The Dangers of E-Cigarettes

There are potential hazards associated with electronic cigarettes (e-Cigarettes) and electronic nicotine delivery systems (ENDS) due to the instability of the systems' lithium batteries, which could result in fire or explosion.

Lithium cells possess unique characteristics. If misused or abused (dented, dropped, overcharged or exposed to external heat), catastrophic results are possible and may include first-, second- or third-degree burns, respiratory problems, fire or explosion, resulting in serious injury or death.

Consider the introduced risk and mitigate when in, on and around Army vessels, vehicles and aircraft; or in vicinity of ammunition, explosives and flammable or combustible materials.



<https://safety.army.mil>





Influenza Prevention

Story by Capt. Dexter Williams
Army Public Health Nurse



Most people who get this contagious respiratory illness caused by the influenza virus recover in a week or two without complications. But each year, more than 200,000 people have complications severe enough to send them to the hospital. Another 36,000 die each year from seasonal influenza. Influenza, commonly called "the flu", is an infection of the respiratory tract caused by the influenza virus. Compared with most viral respiratory infections, such as the common cold, influenza infection often causes a more severe illness. Seasonal influenza is among America's most lethal killers, according to the Centers for Disease Control and Prevention (CDC), because the virus infects 5 to 20 percent of the U.S. population every year. Ninety percent of the deaths occur in those ages 65 and older, but the highest rates of infection occur in children. Healthy children younger than 2 years are as likely to land in the hospital because of influenza as those over 65.

Typical influenza illness includes fever (usually 100 – 103 degrees Fahrenheit in adults and often even higher in children) and respiratory symptoms, such as cough, sore throat, runny or stuffy nose, as well as headache, muscle aches and extreme fatigue. Although nausea, vomiting and diarrhea can sometimes accompany influenza infection, especially in children, these symptoms are rarely the primary symptoms. The single best way to protect yourself and others against influenza is to get a flu vaccination every year. The "flu shot" is an inactivated vaccine (containing

killed virus) that is given with a needle, usually in the arm. The flu shot is approved for use in people older than 6 months, including healthy people and people with chronic medical conditions. The CDC recommends flu shots for:

- Children ages 6 months to 2 years, as well as their caregivers and close household contacts
- Adults age 50 and older
- Women who will be pregnant during flu season
- Children on chronic aspirin therapy
- People ages 2 to 64 with an impaired immune system or a serious illness such as chronic heart or lung disease, kidney disease, diabetes, or sickle cell anemia
- People living in nursing homes or long term care facilities
- Health care workers who have direct patient contact

Public health officials urge those eligible for vaccination to receive it and remind people that although influenza vaccination begins in September or October each year, vaccine continues to be available in November, December, and later, and immunization during those months is still beneficial. The flu usually spreads from person to person in respiratory droplets when people who are infected cough or sneeze. People occasionally may become infected by touching something with influenza virus on it and then touching their mouth, nose, or eyes. The following additional measures can help protect against the flu:

- Cover your nose and mouth with a tissue when you

2018-2019 Influenza "Take one for the team" Campaign

AREA I

Hansen Field House	Oct. 26	10 a.m. – 2 p.m.
	Nov. 1-2	9 a.m. – 2 p.m.
	Nov. 8	Noon – 4:30 p.m.
Immunization Clinic:	Mon. – Wed. 8:30 a.m. to 4:30 p.m.	Closed Noon to 1 p.m.
	Thurs. 1 p.m. to 4:30 p.m.	
	Fri. 8:30 a.m. to 4:30 p.m.	Closed Noon to 1 p.m.

AREA II

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

AREA III

PX Food Court	Nov 3	9 a.m. to 4 p.m.
DODEA Schools: Elementary	Nov. 8	8 a.m. to Noon
Middle	Nov. 13	4 p.m. to 6 p.m.
High	Nov. 14	3 p.m. to 5:30 p.m.
Make-up date (all students)	Nov. 29	8 a.m. to Noon
Collier Fitness Center	Dec. 20	8 a.m. to Noon

AREA IV

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

cough or sneeze—throw the tissue away after you use it.

- Wash your hands often with soap and water, especially after you cough or sneeze. If you are not near water, use an alcohol-based hand cleaner.
- Avoid close contact with people who are sick. When you are sick, keep your distance from others to protect them from getting sick too.
- If you get the flu, stay home from work, school, and social gatherings. In this way you will help prevent others from catching your illness.

- Try not to touch your eyes, nose, or mouth. Germs often spread this way.

The most important thing to remember, is that there is an effective vaccine available, which can decrease your odds of contracting a serious case of the flu. The Army Public Health Nurses in your local area will be conducting Public Outreach Influenza events. See page #? For dates and locations in your area.

If you have questions about whether you should get a flu vaccine, contact your health-care provider.

FURY FRIENDS, THE KOREAN COLD, AND YOU —THINGS TO KNOW

Courtesy of 106th Veterinary Detachment



Regardless of when you and your pet arrived to Korea, during your tour you will assuredly include several months of a brutal Korean winter. Just like leaving man's best friend in a hot car during the scorching summer months is a terrible idea, so too is leaving your four legged family member outside in the bitter cold. Here are some tips to keep in mind this winter:

As is true for people, cold weather can make your pet's arthritis worse. So if your pet has been diagnosed with arthritis, or shows signs of it after arrival, make an appointment with a veterinarian to talk about pain management. Also, be aware that arthritic animals can have a hard

time walking well on snow and ice.

Not all animals weather the cold the same. Smaller dogs with short coats have less of a cold tolerance than larger dogs with heavy coats, and dogs with short legs feel the cold faster when their bellies drag on the snow. Also, healthy, younger dogs do better with the cold than older dogs with health problems. So even if your dog was a happy snow bunny in his youth, he may not tolerate the cold as well now that she's older.

Just like you, your family pet should stay inside and out of the harsh winter whenever possible. **It is not true that cats and dogs are resistant to frostbite and hypothermia.** Longer haired and thick coated breeds (like

huskies and malamutes) are more tolerant of cold weather, **but no pet should be left outside in freezing temperatures.**

Blizzards often mean power outages. After you prepare an emergency kit for yourself, prepare one for your pet too. Have on hand enough food, water, medications, and blankets to keep you and your pet fed, warm, and happy for at least three days if disaster strikes.

Antifreeze is lethal for dogs and cats, and many (unfortunately) like the taste. Clean up spills properly and promptly, and never leave it lying around.

For questions about your furry friends see page 87 for the veterinary treatment facility in your area.

ARMY VETERINARY SERVICES
FIRST ANNUAL

one
health
week

NOVEMBER 3-10, 2018

Promoting awareness of the connection between human, animal, & environmental health

\$30 Wellness Discount
Available during **One Health Week**
participating VTFs*

*\$32 minimum invoice required to receive Wellness Discount.

U.S. ARMY APHC

Stop by your local participating Veterinary Treatment Facility (VTF) to take part in the
Global Veterinary Medical Practice (GVMP) One Health Week Event

Family Adventures in Asia: Palau, Micronesia

By Kyle Hoedebecke
PULSE 65 Contributor

This month's travel destination is the island nation of Palau. This Micronesian country consists of approximately 340 islands spanning an area of 466 square kilometers. Koror is the largest city while Ngerulmud has served as the capital since 2006. Palau has its own language that is spoken by the 22,000 inhabitants in addition to English. Interestingly, Palauan society is matriarchal with strict matrilineal systems. Women are the societal decision makers - holding true for issues including inheritance, marriage, funeral, and many other aspects of life in the country.



Entrance to Radang Radang Beach



Palau from above



The traditional fruit bat delicacy

The local food is quite international with heavy Chinese, American, and Japanese influence. A unique dish is fruit bat soup - yes, bat! This is considered a delicacy when cooked over several days in flavors of coconut milk, ginger, and spices. Do not worry, if you are not that adventurous with your meals then there are many more recognizable food options.

Palau is world famous for its diving and water sports. The islands are surrounded by top notch dive sites with the potential to see multiple coral and



animal species. This country is unique in that it created the first shark sanctuary in 2009 to protect these species against poaching and overfishing. Within the sanctuary zone, all commercial shark fishing activities are forbidden. If sharks are not your thing, then take a trip to Jellyfish Lake. This unique habitat hosts millions of non-stinging jellyfish within its waters. Beyond the living species, there are many World War II ship and plane wrecks waiting to be explored. This is a unique opportunity to combine sport and history simultaneously.



A family petting a dolphin at a sanctuary site

For those wanting a more relaxed vacation, Palau has hundreds of pristine beaches where you and your family can enjoy a piece of paradise at your leisure. Another unique feature is that of the Milky Way Lagoon that serves as a natural spa for those who desire to cover themselves in the special white mud.

Palau has direct flights from Seoul and a few other major airports across Asia. Also note that it is a visa-free travel location for U.S. and Korean passport holders.



Sofia Hoedebecke at a local beach

Travel Tip of the Month

When selecting an international vacation spot, ensure that you take the visa requirements and prices into account. Locations like Vietnam, China, Laos, and Cambodia have quite cheap direct flights, but visa requirements and costs may be more trouble than you expected - especially when traveling as a family.

Relay Health Transitions to Tricare Online Secure Messaging

By Leanne Thomas
Tripler Army Medical Center

CHANGE HEALTHCARE



September 30, 2018, military end users will see changes to TRICARE Online

Patient Portal Secure Messaging. These changes are made to transition to new company and unify the products, solutions and businesses under the Change Healthcare brand. This change does not impact the product name nor existing feature functionality – it remains the same service end users have been using.

The changes users will experience include:

- New Change Healthcare logo on the footer of the site
- New look including: font, but-

ton design, and color palette

- A new web address (URL) for TRICARE Online Patient Portal Secure Messaging: www.TOLSecureMessaging.com

- New email addresses for Customer Support

- New sender name and email address for all email notifications (The sender name and email address will no longer use “@relayhealth.com”)

Q: Why were these changes made?

A: In March 2017, the majority of RelayHealth (McKesson Technology Solutions) and Change Healthcare came together to form an independent healthcare IT company. As a result of this transaction, they are

required to use their new company name and can no longer reference McKesson or RelayHealth in their product names. New company is known as Change Healthcare.

Q: Are there any functionality changes to TRICARE Online Patient Portal Secure Messaging?

A: No. You will use all the same features as you do today although the look and feel of these solutions will reflect minor changes in Spring 2018.

Q: Will there be a new website address (URL) for TRICARE Online Patient Portal Secure Messaging?

A: Yes. By September 30, 2018, you will access Secure Messaging through www.TOLSecureMessaging.com

com. After September 30, 2018, mil.relayhealth.com and app.mil.relayhealth.com will no longer be available.

Q: How do patients access TRICARE Online Patient Portal Secure Messaging?

A: Today through Spring 2018: Military Health System beneficiaries will access the TRICARE Online Patient Portal Secure Messaging via mil.relayhealth.com or app.mil.relayhealth.com. By September 30, 2018, you will access Secure Messaging through www.TOLSecureMessaging.com. After September 30, mil.relayhealth.com and app.mil.relayhealth.com will no longer be available, and you will see a “404 Error – Page Not Found” message on the screen.

Q: What happens if the patients or I try to use the old (app.relayhealth.com) web address after September 30, 2018?

A: App.relayhealth.com is the address for the non-military version of the product you are using. After September 30, app.relayhealth.com will

no longer be available, and you will see a “404 Error – Page Not Found” message on the screen.

Q: What happens if the patients or I try to use the old (mil.relayhealth.com or app.mil.relayhealth.com) web address after September 30, 2018?

A: Mil.relayhealth.com and app.mil.relayhealth.com are old addresses for TRICARE Online Patient Portal Secure Messaging. After September 30, mil.relayhealth.com and app.mil.relayhealth.com will no longer be available, and you will see a “404 Error – Page Not Found” message on the screen.

Q: Will I have to change my username and password?

A: No. You can use your current username and password.

Q: Will MHS clinicians/ care team members be able to send patients secure messages during this transition?

A: Yes. All services will be available.

Q: Will I be able to send secure

messages to my patients and MHS colleagues during this transition?

A: Yes. All services will be available.

Q: Will I be able to upload information to a patient health record during this transition?

A: Yes. The patient will be able to upload or download information just as they do today.

Q: Will the patient be able to upload or download information into/ from their RelayHealth accounts?

A: Yes. You will download information just as you do today.

Q: How do I contact Support should I have any questions?

A: From now through Spring 2018: Our Federal Support Team can be reached via email at T1federalsupport@relayhealth.com or phone at 1-866-309-4138. Starting September 30, 2018: Our Federal Support Team can be reached via email at FederalProviderPortalSupport@Changehealthcare.com or phone at 1-866-309-4138.

PATIENT PORTAL SECURE MESSAGING

RelayHealth

IS OFFICIALLY REBRANDED TO
“TOL Secure Messaging”



WWW.TOLSECUREMESSAGING.COM

THE ONLY URL FOR ACCESSING SECURE MESSAGING SERVICES

New marketing materials available for download https://army.deps.mil/army/cmds/AMP_MEDDACK/HotTopic/Training/TOLPPSM/SitePages/Home.aspx

Japanese Encephalitis Vaccine

– What You Need to Know



1. Why get vaccinated?

Japanese encephalitis (JE) is a serious infection caused by the Japanese encephalitis virus.

- It occurs mainly in rural parts of Asia.
- It is spread through the bite of an infected mosquito. It does not spread from person to person.
- Risk is very low for most travelers. It is higher for people living in areas where the disease is common, or for people traveling there for long periods of time.
- Most people infected with JE virus don't have any symptoms. Others might have symptoms as mild as a fever and headache, or as serious as encephalitis (brain infection).

• A person with encephalitis can experience fever, neck stiffness, seizures, and coma. About 1 person in 4 with encephalitis dies. Up to half of those who don't die have permanent disability.

• It is believed that infection in a pregnant woman could harm her unborn baby.

JE vaccine can help protect travelers from JE disease.

2. JE vaccine

Japanese encephalitis vaccine is approved for people 2 months of age and older. It is recommended for travelers to Asia who:

- plan to spend at least a month in areas where JE occurs,
- plan to travel for less than a month, but will visit rural areas and

spend a lot of time outdoors,

- travel to areas where there is a JE outbreak, or
- are not sure of their travel plans.

Laboratory workers at risk for exposure to JE virus should also be vaccinated.

The vaccine is given as a 2-dose series, with the doses spaced 28 days apart. The second dose should be given at least a week before travel. Children younger than 3 years of age get a smaller dose than patients who are 3 or older.

A booster dose might be recommended for anyone 17 or older who was vaccinated more than a year ago and is still at risk of exposure. There is no information yet on the need for a booster dose for children.

NOTE: The best way to prevent JE is to avoid mosquito bites. Your doctor can advise you.

3. Some people should not get this vaccine

- Anyone who has had a severe (life-threatening) allergic reaction to a dose of JE vaccine should not get another dose.
- Anyone who has a severe (life threatening) allergy to any component of JE vaccine should not get the vaccine. Tell your doctor if you have any severe allergies that you know of.
- Pregnant women should usually not get JE vaccine. If you are pregnant, check with your doctor.

If you will be traveling for fewer than 30 days, especially if you will be staying in urban areas, tell your doctor. You might not need the vaccine.

4. Risks of a vaccine reaction

With a vaccine, like any medicine, there is a chance of side effects. When side effects happen, they are usually mild and go away on their own. Mild problems

- Pain, tenderness, redness, or swelling where the shot was given (about 1 person in 4).
- Fever (mainly in children).
- Headache, muscle aches (mainly in adults).
- Moderate or Severe problems
- Studies have shown that severe reactions to JE vaccine are very rare. Problems that can happen after any vaccine
- Brief fainting spells can hap-

pen after any medical procedure, including vaccination. Sitting or lying down for about 15 minutes can help prevent fainting, and injuries caused by a fall. Tell your doctor if you feel dizzy, or have vision changes or ringing in the ears.

- Lasting shoulder pain and reduced range of motion in the arm where the shot was given can happen, very rarely, after a vaccination.
- Severe allergic reactions from a vaccine are very rare, estimated at less than 1 in a million doses.

If one were to occur, it would usually be within a few minutes to a few hours after the vaccination. The safety of vaccines is always being monitored. For more information, visit: www.cdc.gov/vaccinesafety/



5. What if there is a serious reaction?

What should I look for?

- Look for anything that concerns you, such as signs of a severe allergic reaction, very high fever, or behavior changes. Signs of a severe allergic reaction can include hives, swelling of the face and throat, difficulty breathing, a fast heartbeat, dizziness, and weakness. These would usually start a few minutes

to a few hours after the vaccination.

What should I do?

- If you think it is a severe allergic reaction or other emergency that can't wait, call 9-1-1 or get the person to the nearest hospital. Otherwise, call your doctor.

• Afterward, the reaction should be reported to the "Vaccine Adverse Event Reporting System" (VAERS). Your doctor might file this report, or you can do it yourself through the VAERS web site at www.vaers.hhs.gov, or by calling 1-800-822-7967.

VAERS is only for reporting reactions. They do not give medical advice.

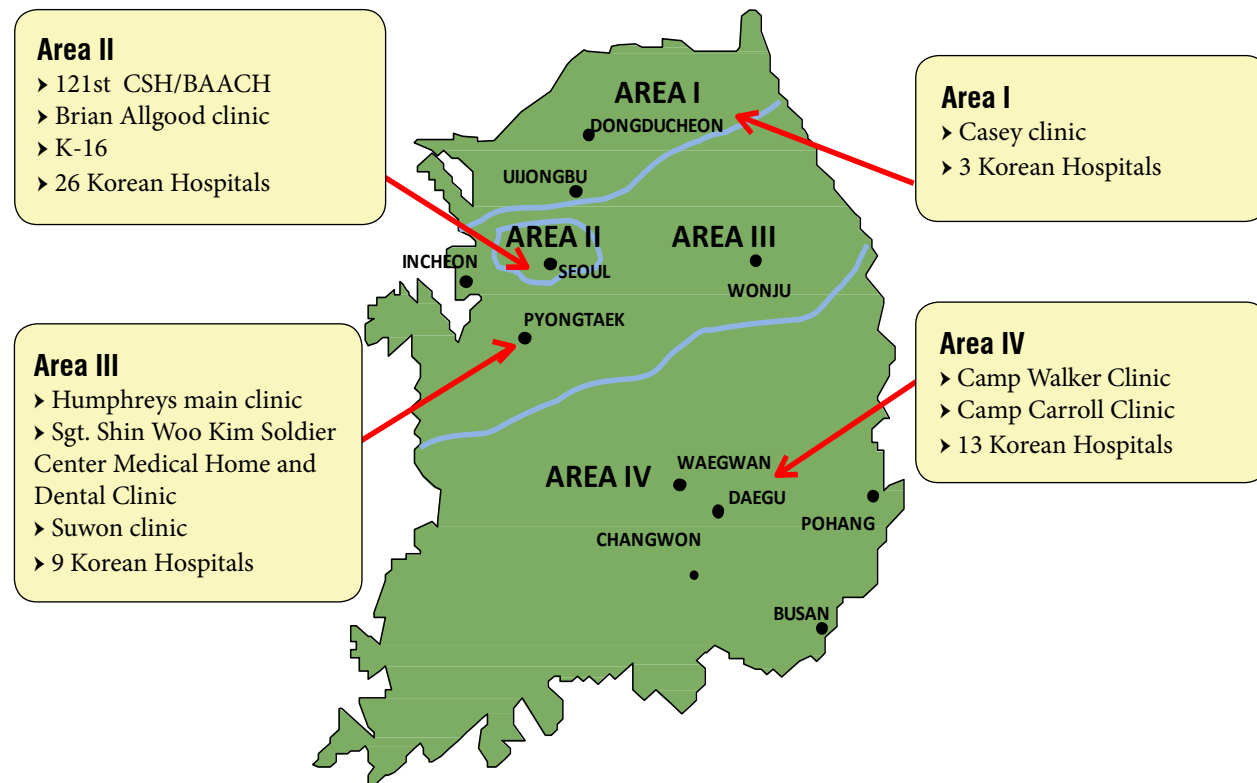
6 How can I learn more?

- Ask your doctor.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
 - Call 1-800-232-4636 (1-800-CDC-INFO)
 - Visit the CDC's travelers' health website at www.cdc.gov/travel
 - Visit CDC's JE website at www.cdc.gov/japaneseencephalitis/

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

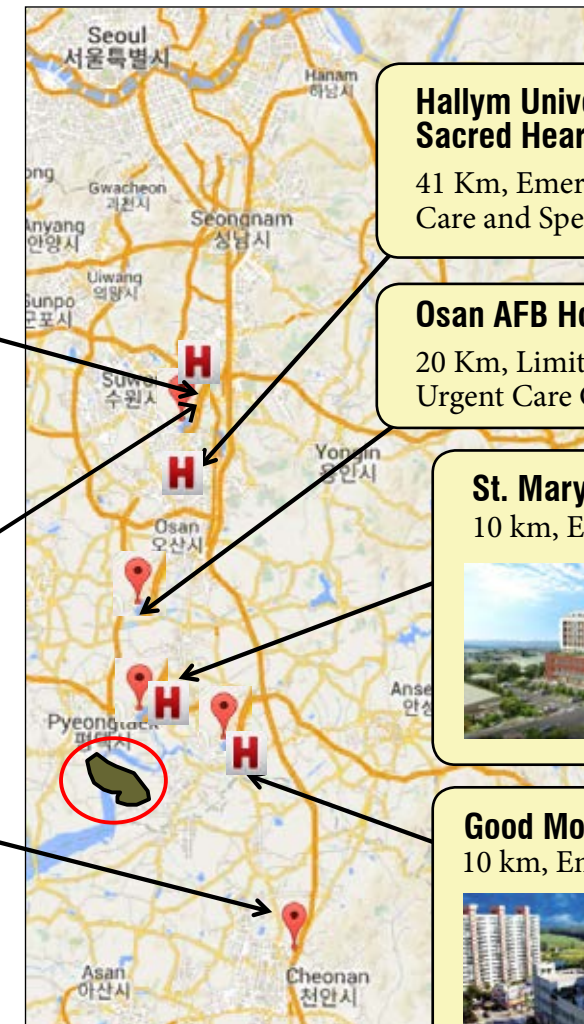
St. Mary's Hospital

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 – Fri 0900 - 1600
One Saturday a month 0900 - 1200

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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Comprehensive Dental Care

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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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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

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



Interment for the late Lt. Gen. Vandal will be at a later date in Arlington National Cemetery, Arlington, Virginia. In lieu of flowers, memorial contributions in his memory may be made to Pancreatic Cancer Action Network, 1500 Rosecrans Avenue, Suite 200, Manhattan Beach, California 90266 or visit <http://support.pancan.org/goto/VandalStrong> (Photo by William Wight, 65th Medical Brigade Public Affairs Office)



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