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"Hawaii's Oldest Service Newspaper -since May 1945"

An authorized publication under AR360-1, prepared quarterly by and for military personnel, TAMC Staff, under the direction of TAMC PAO. The views expressed and opinions expressed are not necessarily those of the U.S.

Government, U.S. Army or DoD.

The editor reserves the right to make editorial changes to any material submitted as deemed necessary.

Chief of Public Affairs - Jim Goose Guzior
TAMC Caducean Editor - Leanne Thomas
TAMC Caducean Asst - Kristi Hayashida
Graphic Artist - Chelsey Kaneshiro

Team Tripler,

As I move into my 3rd month in Command, I am impressed with and humbled by the superlative accomplishments of the TAMC Team. These include impacts to Readiness throughout US INDOPACOM, premier healthcare delivery to our Ohana, and outstanding personal accomplishment that I would like to share with the entire Team.

READINESS: Through RIMPAC'18, support to DRAGON LIFT, and three named storms HECTOR, LANE, and OLIVIA I have been impressed with the engagement, expertise, responsiveness, and coordinated efforts by the TAMC Ohana each time we have been called to 'Step-Up'. Thank you for your outstanding support to Mission and Emergency Management Readiness.

HEALTHCARE DELIVERY: Through our "Hooked on Safety", and "Hooked on Patient Safety" programs we continually strive to improve care, prevent mishaps, and save lives. Your commitment to excellent patient care impacts both locally and internationally, as recently shown by cases of a Sailor from Republic of Korea and a British Naval Officer, both whose governments extended their thanks and gratitude to the TAMC Team for the excellent care provided to their Service Members. Thank you for raising the bar for healthcare delivery and patient experience. In the next quarter getting to "Yes" in less than 15 minutes for every transfer is a goal on our mission of world-class healthcare delivery.

SUPERSTARS: Since arriving to TAMC in July 2018, I have been impressed with the number of top performers in our formation. Those recognized in the last two months include:

- Dr. Craig Bottoni - Army Medicine Civilian of the Year
- Dr. Jone Flanders - Healthcare Association of Hawaii Provider of the Year
- Ms. Leslie Yoshimori, RN - Healthcare Hero (also recognized by Senator Hirono)
- SPC Conner McDuffie - USO Service Member of the Year

I am also proud to announce we have five Soldiers that have earned the coveted Expert Field Medical Badge, under the toughest conditions. TAMC's graduation rate of 17% was over twice that of the overall class; a tribute to the exceptional teamwork and training of the TAMC Team. Please join me in congratulating:

- 1LT Jonatan Caballero, Alpha Company
- SSG Francisco Calderon, Microbiology
- 1LT Joshua Calloway (Honor Grad), Emergency Department
- SSG Ariel Foster, Alpha Company
- SPC Joshua Moore, Emergency Department

In summary, I am blessed and honored to continue to climb toward premier performance with all of you, and look forward to setting the standard for quality and patient experience for a Medical Center as we integrate 'best practices' for the Region, the enhanced multiservice market, and Defense Health Agency (DHA).

COL MARY V. KRUEGER
Commander
Tripler Army Medical Center



TAMC Ohana,

Your professionalism and dedication continues to impress me; I am truly honored to serve as your Command Sergeant Major. In a very short five months you have excelled in the care of our patients and each other. As we begin Fiscal Year 2019; I ask you to continue providing feedback to the command on ways we can improve upon the services we provide, and foster an environment where you feel valued and respected. In the coming weeks we will conduct the Command Climate Survey; I ask that you dedicate your time to responding and providing actionable feedback to the Command as we endeavor to become the healthcare facility of choice to our patients and fulfill the tenets of Ohana to you.

CSM ABUOH E. NEUFVILLE
Command Sergeant Major
Tripler Army Medical Center





Defense Health Agency

2017 NDAA: Transfer of Army Military Treatment Facilities

What is it?

The FY17 National Defense Authorization Act (NDAA), Section 702, directs the Defense Health Agency (DHA) to assume responsibility for the administration and management of healthcare delivery at all military medical treatment facilities effective Oct. 1, 2018. This transfer maximizes efficiencies while maintaining a ready and lethal Army, with the clear objective of providing community care during seamless transition.

What has the Army done / is doing?

Starting with Womack Army

Medical Center at Fort Bragg, North Carolina, the transition for administration and management of medical facilities will occur in a phased approach that will take place over the next 24 to 36 months. OCONUS Army Medical Treatment Facilities (MTFs) will be the last phase of the transition.

The Army surgeon general will maintain the responsibility to recruit, organize, train and equip the medical force. Army Military medical personnel will be assigned and managed by their service to ensure that medical personnel are trained and proficient in their

jobs. FORSCOM commanders will be part of the supervisory chain for MTF directors to guarantee that the medical readiness of Soldiers remains a top priority.

What continued efforts does the Army have planned?

The administrative transfer of MTFs to the DHA will not change the access to and quality of healthcare and will be transparent to the Soldiers, Family members, and Soldiers for Life who will continue to receive quality medical care. As each of the military services have extensive experience managing and administering MTFs, they will ensure best practices are incorporated into the DHA organizational structure.

MTFs will continue to be service-affiliated, unless a decision is made at a later date to become tri-service in nature. The Army surgeon general will continue to serve as the principal advisor to the secretary of the Army on all health and medical matters and serve as the chief medical advisor of the Army to the director of DHA. Other functions such as the Integrated Disability Evalu-

ation System, Warrior Care and Transition, Embedded Behavioral Health, and Family Advocacy Program Support will remain with Army Medicine.

Why is this important to the Army?

Soldiers are the Army's greatest strength and maintaining their medical readiness through world-class healthcare is the Army's top priority. The FY17 NDAA creates a single, integrated military healthcare system focused on healthcare delivery.

This reorganization will improve the medical readiness of the forces, eliminate redundancies and generate cost savings between the management of Army, Navy and Air Force MTFs.

The Military Health System (MHS) transformation is about building and strengthening a more integrated and effective, high-quality healthcare system that supports the readiness and lethality of the joint force.

Level II Trauma at Tripler moves closer to reality

The U.S. Army Surgeon General, LTG Nadja West, directed the Army Medical Department (AMEDD) to focus on readiness. For AMEDD, readiness comes in the form of a "Ready Medical Force" where trauma care is projected anywhere in the world. In order to ensure all members of the medical team are ready to deploy and carry out that mission, the National Defense Authorization Act (NDAA) of 2017 directed all military medical centers to achieve either a Level I or Level II Trauma Center status. The American College of Surgeons (ACS) is the verifying organization for trauma and by their definition, a Level II Trauma Center (along with Level I) receive the most critically injured patients. Level II Trauma provides an ideal training platform to ensure all members of the medical team are prepared to care for those in harm's way.

Tripler Army Medical Center began the process of becoming a Level II Trauma Center in August 2016. The verification process to become a Level II Trauma Center is very rigorous to meet the requirements of ACS. In order to achieve verification the hospital must clearly demonstrate the ability to provide comprehensive care along a continuum for critically injured patients in the emergency room, operating room, intensive care unit, and wards. In addition, ancillary support from the blood bank, laboratory, radiology, interventional radiology, and rehabilitative services are equally critical. Trauma outcomes are closely tracked through the Performance Improvement

Patient Safety Program (PIPS) and the Trauma Quality Improvement Program (TQIP).

The TAMC Level II Trauma initiative has received support from ACS, the local community, and the State of Hawaii Department of Health. In January 2018, TAMC began the one year verification period required by ACS with a scheduled site visit set for February 27-28, 2019. Verification is an extremely rigorous, detailed, and organized process that looks at every aspect of the trauma program as defined in the ACS Resources for Optimal Care of the Injured Patient, which lists over 400 criteria that must be met without exception to achieve verification. To ensure verification compliance, the TAMC Trauma Program is led by myself, Trauma Medical Director, COL Dwight Kellicut, Trauma Program Manager, Ms. Audra Roulet, and the Trauma Registrar, Ms. Elsa Roberts.

At the midpoint of the verification year, TAMC underwent a Mock ACS Trauma Survey in July. The goal of the survey was to shine a light on what is going well in the trauma program and what needs improvement. Overall, the survey went very well and collectively as a team we have much to be proud of! We had positive feedback about the 2018 Mass Casualty (MASCAL) event, utilization of simulation training in trauma, PIPS collaboration, as well as having a dedicated team of leadership and liaisons for the TAMC Trauma Program. There were some identified areas that needed improvement upon and moving forward that will be the focus. The

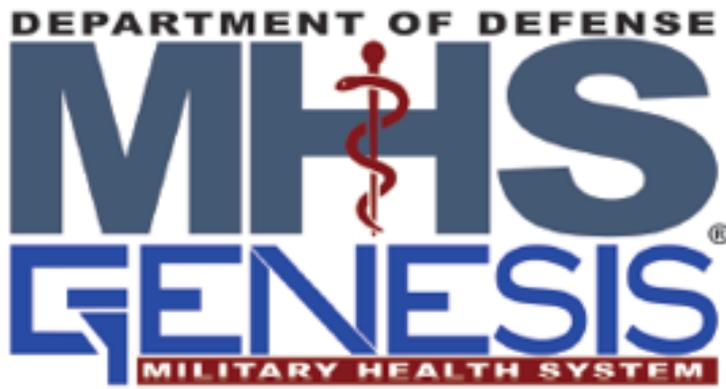
TAMC Trauma Program members are actively working with each department throughout the hospital to maintain the current initiatives, as well as building upon them to ensure we stay in alignment with the specific criteria for Level II Trauma verification.

Level II Trauma at TAMC is an extraordinary process and opportunity. There has been much work to get us to where we are, however there remains much still to do, but we are inspired by our trauma motto, "A' ohe hana nui ke alu 'ia," translated to, "No task is too big when done together by all." It is with the dedicated and studious work of all of us, that we reach far, and not only achieve our goals, but exceed them.

- COL Dwight Kellicut, TAMC Director of Academic Research & Training / Trauma Medical Director



OPERATIONAL FIELD NOTES



NEW ELECTRONIC HEALTH RECORD COMING TO TAMC

By now you have probably heard about the new Electronic Health Record (EHR) called MHS GENESIS which is already deployed in the Pacific Northwest region of the country. MHS GENESIS is the modernized EHR that will

replace legacy healthcare systems, including but not limited to: AHLTA, the Composite Health-Care System (CHCS), and Essentris. It integrates inpatient and outpatient solutions that connect medical and dental information

across the continuum of care, from point of injury to the military treatment facility.

Initial operational testing and evaluation ended at our initial sites this past July. The Initial Operational Capabilities (IOC) sites, also known as “test sites” were Fairchild Air Force Base Health Clinic, Naval Hospital Oak Harbor, Naval Hospital Bremerton, and Madigan Army Medical Center. Experts are now working on feedback gathered from the IOC sites and to apply lessons learned as integration continues. MHS Genesis deployment is planned in 12-15 month wave cycles (which will overlap), with a total of 23 “waves.” The next sites to deploy MHS GENESIS are considered “wave one.” While we may experience slight changes to the wave order and timeline, the latest proposed deployment schedule, dated August 2018, projects MHS GENESIS deployment will take place at Tripler

Army Medical Center between 2nd quarter FY 2020 to 4th quarter FY 2021. Tripler is no longer expected to be at the end of the wave cycle as initially proposed.

Preparation is already underway, mostly behind the scenes as Tripler Information Management Division, in conjunction with the Defense Health Agency, updates TAMC’s IT infrastructure and network. As more information is released, the Clinical Informatics Department is also preparing by analyzing existing workflows within our inpatient and outpatient areas, as well as identifying what training support will be required.

For more information about MHS GENESIS, visit <https://health.mil/mhsgenesis>. For more information about the Defense Health Agency, visit <https://www.health.mil/dha>.

-Brandon Henderson, Chief, Clinical Systems Training, TAMC

FY 2018 TAMC GLOBAL HEALTH ENGAGEMENTS

-John Orendorff, Chief, TAMC Operations



The National Security Strategy recognizes that global health and security are inextricably linked, and the DoD’s Global Health Engagement (GHE) efforts are critical to advancing U.S. troop operational readiness, building interoperability, and enhancing Security Cooperation. Our aim is to strengthen and sustain our national security by building partner nation capacity and relationships in support of DoD, DA, and Army Medicine priorities.

GHEs focus on 4 activities:

1. Force Health Protection
2. Building Partner Capacity & Interoperability
3. Humanitarian Assistance & Foreign Disaster Relief
4. Nuclear, Chemical and Biological Defense Programs



Aloha TAMC Ohana, I hope you are enjoying this first issue and rebirth of the TAMC Caducean! The original TAMC Caducean Newspaper was born in May 1945 and ran bi-monthly until 1987. During the 40's and 50's and through the 60's and 70's, TAMC was a hub of care and entertainment provided for Soldiers as they transitioned in/out of the Pacific during war. Legendary performers graced our halls like Louie Armstrong, Jack Lord, 4 Freshman, Brooklyn Dodgers 1995 World Champions and more. Tripler was more than a hospital, it was an oasis for families, Soldiers and the community. The four page TAMC Caducean was printed and distributed throughout the local community and became a mainstay newspaper in Honolulu to see what the military was doing during the war. The Caducean reported not only medical news but USARPAC news, sports and everyone's favorite - entertainment. Today, that newspaper has largely been replaced with social media as the age of newspapers is rapidly coming to an end. The honorable work of TAMC and its staff continues and so we have brought back The Caducean from its 1987 resting place, in its newest form, as a TAMC Newsletter for our honored staff. Today, we still have Hollywood knocking on our door, Soldiers deploying and a world-class medical staff serving our patients. We hope this quarterly Caducean Newsletter brings those stories a little closer to you along with the outstanding events and efforts happening in our halls every day. - **Goose**

TOP STORIES

MORE TOP STORIES:

<https://www.tamc.amedd.army.mil/news/topstories.htm>



ARMY.MIL

Krueger assumes command of Tripler Army Medical Center

Tripler Army Medical Center welcomes a new commander during a change of command ceremony, July 10. During the ceremony Col...



ARMY.MIL

MASCAL exercise enhances readiness at Tripler Army Medical Center

HONOLULU - U.S. Army Soldiers and civilian staff at Tripler Army Medical Center (TAMC) conducted a mass casualty exercise, July 12, as part of a...

WHAT'S TRENDING

f Tripler Army Medical Center

564 likes 102 shares 387 comments

#HurricaneLane has strengthened to a Category 5

t @TriplerAMC

7 likes 1,782 impressions 2 retweets

#CONGRATS: Ms. Yoshimori, #Tripler nurse, was presented with a certificate of special congressional recognition ...

ig triplerarmymedicalcenter

26 likes 126 viewers

The @usarmy gained 17 #EFMB #Soldiers in the #Pacific ... 5 from #Tripler ...



Looking to get the word out?

Check out the "PAO 101" on the PA Portal here, <https://sp.tamc.amedd.army.mil/mchk-cg/mchk-pao/default.aspx>



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WELCOME TO THE JUNGLE

TAMC COMBAT MEDIC NAMED HONOR GRAD AT 25ID JUNGLE SCHOOL

By Leanne Thomas, Tripler Army Medical Center | September 7, 2018

SCHOFIELD BARRACKS, Hawaii -- Staff Sgt. Gabriel Mejias is the noncommissioned officer in charge of TAMC's Neonatal Intensive Care Unit, but he is always a warfighter first. The U.S. Army combat medic proved just that when he was recently named the 25th Infantry Division's Jungle Operations Training Course (JOTC) distinguished honor graduate on Aug. 10.

"This was great training for me as a medic because I'm not used to doing the infantry tactics every day being in the hospital," explained Mejias. "So it was a great opportunity to get out there and learn from other MOS' (Military Occupation Specialties) who do this more often."

Mejias' accomplishment also caught the attention of TAMC leadership. Command Sgt. Maj. Luis Maldonado, TAMC's Troop Command said, "I have seen Staff Sgt. Mejias' dedication to the training and the mission. He earned the right among all the warfighters in his class to call himself the distinguished honor graduate, and he is a trusted SME (subject matter expert) in jungle warfare."

JOTC, or "Jungle School," is offered by the 25ID Lightning Academy to prepare Soldiers for combat operations in a jungle environment. The 20-day course tests students on jungle mobility training, waterborne operations, combat tracking, jungle tactics and situational training exercises at the squad and platoon levels.

Because of TAMC's geographic location, the hospital's Troop Command, a battalion-sized element, deploys Soldiers to support missions throughout the Pacific region where many nations have jungle environments. Earning special skill sets, such as the Army's Jungle Expert tab, allows medics at TAMC to become more agile, versatile, and lethal, ready to deploy in the Pacific or augment any unit around the world in support of the warfighter's readiness.

Maldonado thinks JOTC is helping medics to be better prepared for their mission, "We are training our medics today to deploy and fight tomorrow. By providing this skill set (jungle warfare training), we are able to train our line medics to be lethal in combat and fight alongside our brothers in combat arms."

As a combat medic, Mejias recognized the harsh terrain of the jungle presents unique challenges when it comes to saving lives on the battlefield, such as an inability to use an armored vehicle or land medical evacuation helicopters. Most often, a combat medic has only himself and the tools he carries available to perform a medical evacuation. A simple extraction can turn into life or death not only for the casualty but for the medic as well. Jungle warfare, with its rugged terrain, requires knowledge of specific techniques and tactics to do what all warfighters are professionally trained to do - shoot, move and communicate, and medics have one more, keep their patients alive.

"The jungle terrain changes the whole aspect of how we (Soldiers) operate," Mejias explained. "There are a lot of gulches and hills you have to get through, and some gulches that you have to rappel down with ropes. There's just no way you can walk down parts of the terrain, especially while carrying a 70- to 80-pound rucksack and weapons."

Mejias credits the invaluable experiences from other Army competitions, specifically earning his expert field medical badge and the TAMC 2018 NCO of the Year competition for his success at jungle school. Both competitions tested Mejias mentally and required him to think critically as well as adapt and be resilient.

Mejias pulled from those experiences and became just as confident in his warfighting skills as the combat arms Soldiers he trained alongside. However, it wasn't until the last day of jungle school that Mejias even thought about being recognized as the JOTC distinguished honor graduate.

"One of the instructors came up to me and told me that I'm in the running for 'honor grad' because I didn't have any negative actions against me, and I didn't 'No-Go' any of the events," Mejias explained. "I feel like I just got lucky, and I was at the right place at the right time, every time. I just did what I had to do when it came down to the last second."

Mejias is thankful to his wife for her support of him and his love of being an Army NCO. With her support, Mejias says even though she doesn't like when he is away, she understands, and that support helps him focus on the mission and be successful.

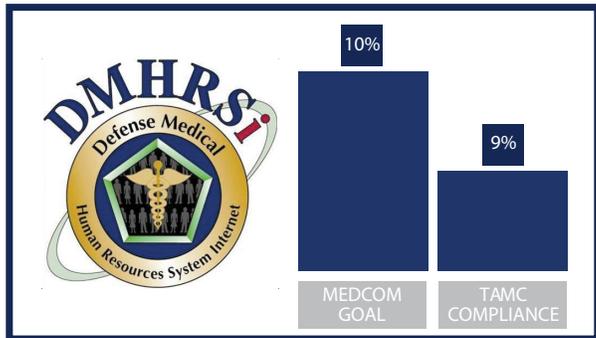
The recent distinguished honor graduate is taking his title seriously as he heads back to his normal job. "Being the distinguished 'honor grad,' I take a lot of honor and responsibility in that and know that now this is something that is expected for me to know and train others to do as well."

Courses such as the 25ID's Jungle School continue to enhance the readiness of TAMC Soldiers by ensuring they are prepared to deploy in any environment at a moment's notice in support of the world's premier combat force.





DMHRSi G-Code Compliance TAMC Leads The Way! Keep moving...



‘Ohana, as we continue to prepare ourselves and family members for hurricane season and other related natural disasters, it is important that we capture the time spent away from our work areas planning, preparing, or in an actual disaster.

Use the DMHRSi Entry Code GGAA for Planning and Preparation and GGA8 for all exercises, training, or an ACTUAL disaster, to include TDY to disaster sites. These codes can be used for both military and civilian personnel.

- MSG Charisse Ellison, Chief Medical NCO, TAMC

RMD renamed to BOD

Resource Management Division (RMD) was recently renamed to Business Operations Division (BOD). Under the new BOD construct, the Manpower and Agreements Branch was renamed to Manpower Analysis & Partnerships Branch and absorbed the Health Planning & Analysis/Contracting Officer's Representative (COR) team and the VA Coordinator responsibilities from Managed Care Division (MCD). MCD was dissolved to consolidate all business functions under the BOD and move all clinical functions to the Clinical Support Division, which was renamed to the Clinical Operations Division (COD). There were no organizational changes to other BOD branches (Program and Budget, Program Analysis & Evaluation/MEPRS, and Uniformed Business Office), but there was a major revamp of internal processes and integration efforts within BOD.

Starting in FY19, BOD is implementing a new business plan and resource management methodology to provide consistent, bi-weekly feedback to work-center managers. The new BOD plan will effectively enable work transparency, predictability, and accountability of resource requirements across TAMC. The focus will be on managing resources based on a customized key statistic for each work center. BOD will be actively reaching out to departments to implement this new and revitalized business plan. We urge all TAMC staff to be engaged, proactive and responsive to ensure TAMC meets mission requirements while also staying within budget.

- Kiyo Callejo, TAMC Manpower Analysis & Partnerships Branch.
Chief Business Operations Division & Rafael Desantos,
TAMC Management Analyst



ATCTS Registration... Why is this required?

OTSG/MEDCOM Policy Memo 17-018 requires all personnel with access to the Army network be defined to the Army Training and Certification Tracking System (ATCTS) <https://atc.us.army.mil/iastar/>. ATCTS collects all Cyber training taken from the Fort Gordon site.

ALERT and LOCK screens... What's up?

The yellow 'ALERT' screen and orange 'LOCK' screens are coming back after being suspended while TAMC was transitioning from MEDCOM to the DHS. Network users will see the yellow 'ALERT' screen for not being registered on ATCTS and for being within 30 days of expiration for DoD Cyber Awareness Challenge training or acknowledgment of the Acceptable Use Policy (AUP).

To check your status, go to the link below:

<https://webapp3.tamc.amedd.army.mil/ATCTSCompliance/UserDetails.aspx>

- Frank Lohman, TAMC Information Assurance Manager /
Information System Security Manager



In the coming months, Information Management Division (IMD) and the Defense Health Agency (DHA) will be upgrading and modernizing Tripler Army Medical Center's (TAMC) and Schofield Barracks Health Clinic's (SBHC) Local Area Network (LAN) and Wireless LAN equipment.

This will involve running and installing over 900 CAT6 and fiber cables, installing over 400 network switches and over 1,000 wireless access points throughout TAMC and SBHC. This project will have an impact in all areas, as installation teams will need access to install cabling and equipment.

IMD will coordinate with each area to publish a floor by floor schedule.

- Curtis Furutani, TAMC Information Management Division



Fight the Flu

Tripler Army Medical Center's Adult Immunizations Clinic will be holding a flu drive at Oceanside 4C, on the following dates:

Oct 2-4
6a.m. -6p.m.

for all Tripler staff and high risk personnel, at Oceanside 4C

Oct 5
6a.m. -6p.m.

for all TRICARE beneficiaries over the age of 18

*Under 18, will have to vaccinate at the clinic that they are assigned/empaneled to. The following clinics will hold Flu drives from 8:00 a.m. to 12:00 p.m.

FAMILY MEDICINE

October 27
November 3

PEDIATRICS

October 13
October 27
November 3
November 24

ASHMS is here!

What is ASHMS and why is everybody talking about it?

ASHMS is the Army Safety and Health Management System (ASHMS). At both entrances to TAMC, take a look up at the giant photos of your ASHMS Champions and ask yourself, "What am I doing to contribute to the safety culture at TAMC?"

What about the short ASHMS videos on the TV monitors as you wait for your elevator? Why is this important and what does it have to do with me?

MEDCOM and TAMC have adopted ASHMS as the process for providing employees a safe and healthful work place. The intent of ASHMS is for both management and employees to actively participate in the TAMC safety program creating a culture of safety throughout the organization.

The key to the success of the ASHMS program is for everyone to actively participate in the safety program in at least three meaningful ways.

Can you articulate the four pillars of ASHMS? Can you demonstrate your safety rights and responsibilities? What are the hazards and risks of your job and how do you protect yourself from them? Do you know how to report a safety issue or an injury, who to notify and the required forms? Have you participated in conducting a Job Hazard Analysis (JHA)? Have you participated/provided safety training? Have you reported/tracked a safety issue?

Are you a member of, or have you participated in a safety committee? How do you promote safety? What about other examples of your involvement with safety?

If you need any assistance with your safety and occupational health programs call Scott Knowles 433-5620 | Deb Thompson or Vince Wilson 433-6078, TAMC Safety and Occupational Health





Focus on Family Meals

Now that fall is in full swing, it's safe to say school is in session and families are busy with many commitments. Try not to overlook the benefits of sitting down to enjoy a delicious meal together.

Family meals give parents the chance to be role models in creating a supportive environment that promotes healthy eating for their children. Evidence shows that when children grow up in families that eat meals together they are less likely to have weight struggles, they have a lower risk of behavior problems and drug use, and are less likely to use cigarettes and alcohol when they grow older.

Make Sunday Dinner a Family Affair—start by committing to eat at least one meal together each week and go from there!

Make dinner a Team Effort—share the tasks required to put dinner on the table. Adults can make the entrée, older kids can put together sides and salad, and little tykes can set the table.

Keep it Simple— Be realistic about the time you have available for cooking and build a small collection of go-to recipes that minimize your time in the kitchen to 30 minutes.

Dinner Dialogue— Shut off the electronics and take time to connect with your family after a long day. Visit the Family Dinner Project web-site for ideas on conversation starters that will help inspire deeper discussions (lots of creative recipes to sift through as well!).

- MAJ Susan Stankorb,
Chief, TAMC Production and Service

- MSG Kristine Sawyer,
NCOIC, Nutrition Care Division

Tailgate Chili

- 1 lb.** 95% lean ground beef
- 1** medium onion, chopped
- 1** medium green bell pepper, chopped
- 1** medium jalapeño, chopped
- 4** garlic cloves, minced
- 1 tbsp** chili powder
- 1 tbsp** ground cumin
- ½ tsp** ground coriander
- 15.5oz** canned, low-sodium, pinto beans
- 14.5oz** canned, low-sodium, diced tomatoes, undrained
- ¾ cup** jarred salsa (low-sodium)

- 1.** Cook beef and onion over medium heat for 5-7 minutes. Transfer to colander and rinse then return to pan.
- 2.** Stir in bell pepper, garlic, chili powder, cumin, and cook for 5 minutes stirring occasionally. Add remaining ingredients bring to boil then let simmer for 20 minutes.

Game Day Salsa

- 2** large red onions
- 2** green bell peppers
- 4** small tomatoes
- 1** can of stewed tomatoes
- 1 cup** white vinegar
- 1 tsp** accent or your choice of seasoning
- ½ cup** ketchup
- 2 tsp** sugar
- 1½ cup** water
- 1 cup** lemon juice
- to taste** oregano salt pepper and chili powder

- 1.** Cut vegetables into small pieces and place in a bowl with vinegar and lemon juice. Add salt and pepper to taste.
- 2.** In a blender combine stewed tomatoes, chili powder, ketchup, water and blend for 30 seconds. Add mixture to the vegetables and mix with a spoon. Add remaining spices and seasonings. Serve and enjoy!

UPCOMING EVENTS

OCTOBER

Sept. 30 – Oct. 6	Midwifery Week	<p>October is Breast Cancer and Ovarian Cancer Awareness Month Did you know? Pap smears for cervical cancer screening is recommended for women ages 21 to 65 years every 3-5 years, and mammograms for breast cancer screening is recommended for women ages 50 to 75 years every two years.</p> 
Oct. 7-13	National Healthcare Food Service Worker Appreciation Week <i>(Be sure to thank a service worker for what they do for the team!)</i>	
Oct. 9-12	Enlisted Professional Development Week	
Oct. 12	TAMC Enlisted Dining-In	
Oct. 15	National Hispanic Heritage Observance	
Oct. 15-19	TAMC Pharmacy Week	
Oct. 21	Light the Night Maternal Child Nursing Department <i>*in honor of Pregnancy Loss & Awareness Month</i>	
Oct. 31	House of Errors	

NOVEMBER

Nov. 4-16	Pacific Regional Trials 2018, Schofield Barracks	<p>November is Warrior Care Month Tripler is proud to have one of the U.S. Army Warrior Transition Battalions, "WTB-Hawaii," as part of our organization to support wounded, ill and injured Soldiers in their recovery.</p> 
Nov. 6	Commander's Award Ceremony	
Nov.16	TAMC DFAC Thanksgiving Meal	

DECEMBER

Dec. 7	TAMC Christmas Ball	<p>December is Global Health Month Did you know? A healthy partner is a stable partner! Supporting partner nations' health system capacities is a critical element of global health engagement.</p>
Dec. 14	Annual Staff Appreciation Meal	



For more INFO check out the TAMC 360 on the portal: <https://sp.tamc.amedd.army.mil>

CALLING FOR CONTENT

If you'd like to include information about your department in the next quarterly issue of the TAMC CADUCEAN (staff newsletter), email the TAMC Public Affairs Office at

usarmy.tripler.medcom-tamc.mbx-public-affairs-office@mail.mil

no later than Dec. 5, 2018.

(The TAMC CADUCEAN NEWSLETTER is an internal staff communication product – for the staff, by the staff.)



Tripler in Photos

4TH QTR, FY 2018

