

JANUARY 2019



BROOKE ARMY MEDICAL CENTER

FOCUS

YEAR IN REVIEW



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BAMC Family,

CSM Oates and I would like to wish our BAMC Family a very happy, healthy and prosperous new year. We hope that you took some time over the holidays to enjoy family and friends and rest and rejuvenate for the exciting year ahead.

As we move into 2019, we look forward to the many opportunities ahead. Our continued commitment to becoming a High Reliability Organization, focusing on total force readiness, and expanding our virtual health capabilities will ensure we remain a vital part of shaping the future of military medicine today and for many years to come.

We also anticipate changes in the year ahead as we look to transition to the Defense Health Agency in the new fiscal year. This transition is mandated by the 2017 National Defense Authorization Act to improve access to quality care for beneficiaries while enhancing readiness. We will share information with you as we receive it, but rest assured, our focus will continue to remain on our core mission: supporting the warfighter and caring for our patients.

Maintaining our mission and vision is a vital part of our future. We protect the Nation by ensuring Total Force Readiness through innovative, high quality care and the development of elite healthcare professionals. By doing this, we will be the pinnacle of military healthcare -- Anytime, Anywhere!

CSM Oates and I greatly appreciate your hard work. Your diligence and attention to detail only serve to further reflect the excellence, dedication and devotion to patient-centered, safe, compassionate care you exhibit every day. Keep up the great work!

George N. Appenzeller
Brigadier General, U.S. Army
Commanding General

Thomas R. Oates
CSM, USA
Commanding Sergeant Major



Mission

We protect the Nation by ensuring Total Force Readiness through innovative, high quality care and the development of elite healthcare professionals.

Vision

To be the pinnacle of military healthcare — Anytime, Anywhere!

BAMC Medical Personnel Provide Lifesaving Support in Puerto Rico

BY LORI NEWMAN

Brooke Army Medical Center Public Affairs

Brooke Army Medical Center doctors, nurses and medics recently returned after being deployed to Puerto Rico for more than a month providing support to the local population in the wake of the devastation from Hurricane Maria, Sept. 20, 2017.

Emergency medicine physicians, Air Force Col. Mark Antonacci, Army Maj. Daniel Sessions and Army Capt. Melissa Myers along with four nurses and two mobile medics from BAMC joined members of the 14th Combat Support Hospital to provide medical care for the victims of the Category 5 hurricane.

Antonacci, a member of a six-person Air Force Ground Surgical Team, originally went to the U.S. Virgin Islands after Hurricane Irma and ended up in Puerto Rico to help support the mission there.

“My team was helping out in areas where they needed manpower, more than anything else,” he said. “We also provided some assistance with evacuations, consultations and hands-on patient care.”

Sessions and Myers deployed to Humacao, Puerto Rico with the 14th CSH, 44th Medical Brigade from Fort Benning, Georgia to provide lifesaving healthcare.

“The conditions were very bad when we first arrived,” explained Antonacci. There was downed powerlines everywhere, no electricity or cell phone service, and a lack of food and water. Military personnel hit the ground running.

“We set-up the hospital in a basketball arena,” Sessions said. The arena offered limited protection from the torrential rain and winds.

As soon as the field hospital was up and running the people came. Sessions worked the day shift and Myers worked through the night.

“We had one doctor, two nurses and eight or nine medics there doing the majority of the hands-on patient care,” Sessions said. “We were seeing up to 200 patients a day. The cases ranged from medical emergencies to primary medical care, preventive medical care and trauma.”

Along with environmental challenges, the language barrier played a significant role on the team’s ability to provide the much-needed medical support to the local population.

“Only about five percent of the people who came in spoke English,” Sessions said.

In coordination with the BAMC Virtual Medical Center, two Mobile Medics, Sgt. Andrea Bloom and Spc. Christian Bark, accompanied the doctors and nurses from BAMC. The mobile medics coordinated with the BAMC V-MEDCEN to establish daily virtual health provider support from the Internal Medicine Clinic located at BAMC and providers at Dwight D. Eisenhower



Army Medical Center in Fort Gordon, Georgia.

“This truly shows the versatility of virtual health and effectively eliminates the tyranny of distance that so frequently diminishes the medical community’s ability to leverage access to provider support from almost anywhere in the world,” said Army Lt. Col. Sean Hipp, BAMC V-MEDCEN director.

“The medics worked side by side with us providing direct patient care,” Sessions said. “It was similar to being downrange where you have medics practicing within their full scope. A lot of our job is teaching them to practice within their full scope, which is something we are working on here at BAMC.”

The emergency medicine physicians were there to provide training for medics and nurses who weren’t used to practicing emergency medi-

cine in that type of environment. The military medical personnel also worked closely with local medical personnel.

As conditions improved, more local hospitals and clinics became available to help support the needs of patients who required medical care.

“As time went on it was more about informing people where to go and what was open, and less about patient care,” Sessions said.

All agree that even though they faced many challenges during this mission, they found it to be a rewarding experience with many lessons learned.

“It was absolutely rewarding, as deployments go, it’s hard to beat going and helping people who truly need the help,” Myers said.

“There were several pediatric patients who benefited from the care we provided,” she added. “I can’t imagine how terrified it must be to have your child sick and not know where to get help. I think having our facility open provided not only medical care, but a lot of reassurance for families at a terrifying time.”

Sessions said they learned valuable lessons during the humanitarian mission about the types of injuries and environmental challenges military medical personnel would see during a severe weather event, such as a hurricane.

“Coming back here, we are able to communicate to our medics and docs, so that when it’s their turn to take up this mission, they will know what they need to bring in terms of personnel, equipment and training prior to deployment,” Sessions said.



Soldiers with the 14th Combat Support Hospital, 44th Medical Brigade from Fort Benning, Georgia, clean floors to achieve a sterile environment for their hospital Oct. 8, 2017 at Humacao Arena in Humacao, Puerto Rico. The 14th CSH is in the process of establishing a field hospital to support lifesaving efforts in the southeast region of the island.

Photo by Sgt. Thomas Calvert

Army Virtual Medical Center Launches at BAMC

BY LORI NEWMAN

Brooke Army Medical Center Public Affairs

Army Medicine bolstered its virtual health initiative by launching the Army Virtual Medical Center at Brooke Army Medical Center Jan. 4, 2018.

The kick-off ceremony featured demonstrations of cutting-edge virtual medical capabilities and a virtual ribbon cutting ceremony highlighting locations around the globe. The guest speaker for the event was Lt. Gen. Nadja West, The Surgeon General and commanding general, U.S. Army Medical Command.

Then, BAMC Commanding General Brig. Gen. Jeffrey Johnson welcomed everyone to the ceremony and thanked West for choosing BAMC as the site for the Army Virtual MEDCEN.

“Our team has been working diligently to make this mission a success,” the general said. “The team has traveled a long way in under a year. They have already achieved much and the plans they have for the future of Army virtual medicine are grounded in expanding operational support and garrison health delivery efficiency.

“BAMC is already making great strides in leveraging virtual technology to benefit patients in garrison and in remote locations,” Johnson said.

“This is an amazing opportunity for BAMC to leverage state-of-the-art technology to support military medical facilities and patients around the world and for our medical professionals to benefit from a readiness standpoint, always being connected to a network of health professionals with a unifying mission and sense of purpose,” Johnson said.

The general provided examples of how virtual health technology is being applied within the hospital, at the 232nd Medical Battalion to support Soldiers during morning sick call, and in Puerto Rico after Hurricane Maria.

“This is just the beginning of what is yet to come,” Johnson said. “We are looking forward to building a virtual health capability here that will support operational forces anytime, anywhere in the world, bringing the full might of Army Medicine to the greatest point of need.”

The commander thanked Army Lt. Col. Sean Hipp, Army Virtual Medical Center director, and his team for making the Virtual MEDCEN “another jewel in the BAMC crown.”

The Surgeon General also highlighted the importance of virtual medicine on the battlefield and in garrison.

“Virtual health is the future of where we are going in our nation,” West said. “To remain successful and to face future challenges we must be relentless ... in our pursuit of innovation and our commitment to bring care closer to our patients while leveraging cutting-edge technology.”

The Surgeon General described a scenario of



Lt. Gen. Nadja West, The Surgeon General and commanding general, U.S. Army Medical Command; Brig. Gen. Jeffrey Johnson, then Brooke Army Medical Center commanding general, Lt. Col. Sean Hipp, director of the Army Virtual Medical Center, and children from Fort Sam Houston Elementary School cut the ribbon during the Army Virtual Health Kickoff ceremony Jan. 4, 2018. Photo by Robert Shields

how virtual medicine can be used to save Soldiers on the battlefield.

“This capability will be increasingly critical to ensure that Soldiers will survive war wounds and make it home,” West said. “Our primary focus is care for our Soldiers, and also our Sailors, Airmen and Marines, because in this joint environment the bullets, injuries and illnesses know no boundaries or uniform color.

“We have to be mobile, we have to be fast ... and we have to be ready to support them in a full range of military operations,” she noted.

West said the concept of virtual health care is not new. “We have used virtual health and virtual technology to support healthcare since the 1990s,” she said. “Although the virtual medical center is a relatively new concept it builds upon Army Medicine’s previous 20 years of experience as another important step along its path.”

The virtual MEDCEN at BAMC will serve as the organizational structure for medical providers to build virtual health services using new tools in garrison and in deployed settings across all roles of care. It will also be the test site for new capabilities and create a centralized program structure for the global mission of Army virtual health.

“The establishment of the virtual health center is just the beginning,” West said. “The future of virtual health is going way beyond connecting healthcare providers to patients; it connects patients to machines and machines to other machines and eventually real-time medical condition assessments through remote monitoring.”

During the event, a team of Mobile Medics

demonstrated some of the equipment they use to complete a patient assessment and communicate with a health care provider via video conferencing.

“The mobile medic program leverages training with cutting-edge, virtual technology to meet our service members’ medical needs worldwide all the while maintaining the medic’s proficiency and state of readiness necessary for their success on the battlefield,” said then BAMC Command Sgt. Maj. Diamond Hough.

The event also featured artwork by Fort Sam Houston Elementary School students who displayed their concepts of virtual health.

West, a self-proclaimed Trekkie, compared some of the virtual health care innovations to those presented on Star Trek many years ago. “I think we are going to be there fairly soon,” she said.

“I’m really excited about being part of the activities today, but I’m even more excited about the future of Army Medicine,” West concluded.



BAMC Re-Verified as Level I Trauma Center

BY ELAINE SANCHEZ

Brooke Army Medical Center Public Affairs

Brooke Army Medical Center has again been verified as a Level I trauma center by the American College of Surgeons for its dedication to providing top-quality care for critically injured patients.

“This accomplishment reaffirms our ongoing commitment to providing the highest quality trauma care for our civilian and military patients,” said then BAMC Commanding General Brig. Gen. Jeffrey Johnson. “It’s also a testament to our trauma staff’s teamwork, professionalism and expertise.”

Hospitals seeking verification must undergo intense scrutiny by reviewers from the American College of Surgeons Committee on Trauma every three years. To be verified, the hospital must demonstrate its ability to provide a broad spectrum of trauma care resources to address the needs of all injured patients.

“We are fortunate to have incredible teams of trauma surgeons and supporting specialists at BAMC,” said Army Col. Bret Ackermann, Deputy Commander for Surgical Services. BAMC’s “team of teams” includes orthopedic, cardiothoracic, vascular, otolaryngology, oral and maxillofacial, plastic, and neurologic surgeons, in addition to anesthesia, emergency medicine, internal medicine, infectious disease, critical care, pulmonology, physical therapy, neurology, rehabilitation, radiology, nursing and operative technician teams.

BAMC is the only Level I trauma center within the Department of Defense and one of two Level 1 trauma centers within San Antonio. Alongside University Health System, BAMC administers lifesaving care to more than 4,000 trauma patients each year, including 750 burn patients, from an area that stretches across 22 counties in Southwest Texas and encompasses 2.2 million people.

Of the over 4,000 trauma patients admitted each year, 85 percent are community members without military affiliation. Johnson cited the recent Sutherland Springs church shooting as an example of BAMC’s readiness to provide care. Eight patients from the shooting were cared for at BAMC with



A trauma team examines a patient in the emergency department at Brooke Army Medical Center. BAMC has again been verified as a Level I trauma center by the American College of Surgeons. U.S. Army photo by Robert Whetstone

wounds similar to those sustained in war. “Due to our daily trauma mission and the experience we’ve garnered downrange, we were ready when needed and honored to provide care,” the commander said.

The trauma center is not only an asset within the community, but is “absolutely critical” to military medical readiness, Johnson said. “There is no other place within the DoD that has the volume of trauma in their hospital to accomplish our wartime training and sustainment of health professionals’ mission,” he said.

This readiness enables BAMC professionals to respond quickly and efficiently when called upon, whether here in San Antonio or deployed overseas, he said.

“What we do here ensures our medical personnel are ready to do what’s needed to save a life whether stateside or downrange for full scale military operations or humanitarian assistance,” Johnson said. “This is who we are and what we do.”

14 Soldiers Achieve Coveted Badge During BAMC’s First EFMB Challenge

BY LORI NEWMAN

Brooke Army Medical Center Public Affairs

Eighty-four candidates converged on Camp Bullis March 17, 2108 to begin their quest for the coveted Expert Field Medical Badge. Only 14 Soldiers walked away with the esteemed badge during a ceremony held March 28, 2018.

Following in-processing, the candidates cycled through a week of standardization to learn the performance standards and what was expected of them during testing.

During testing week, the candidates first took their written exam, which included questions from four categories: warrior skill level one tasks, medical detainee operations, field sanitation, and medical tasks.

Army Capt. Paul Rosbrook, B Company, 187th Medical Battalion, received the highest score on the written test.

“This is not an opportunity that comes around often for officers,” Rosbrook said about

the opportunity to go for the badge. “I realize that if you want these things you have to recognize opportunities and take them.”

Rosbrook credited the cadre for the support he received during the standardization phase.

“Since I’m a dietitian I’m not very skilled in a lot of the things that we were taught out here,” Rosbrook said. “I give a lot of credit to the great training we received. It was spectacular, just how much time and attention to detail they gave us. They really set a lot of us up for success.”

After the written test candidates had to complete both day and night land navigation. If they were able to prove their skills they advanced to the three Combat Testing Lanes where they had to demonstrate their warrior skills as well as medical knowledge, completing tasks from four categories: tactical combat casualty care, evacuation, communication and warrior skills.

Each task on the CTLs and land navigation is evaluated as either “Go” or “No-Go.”

Army 1st Lt. Devon Furey, A Company,

BAMC Troop Command, received the most “Go’s” during her quest for the EFMB this time around. Last year in Colorado she fell short of the time she needed to complete the foot march by a mere 50 seconds.

“I was determined to pass this year,” Furey said. “Having the most Go’s was an honor. I thought it was a direct reflection of the effort put forth by the graders on all of the CTL’s who trained us during standardization week, and the ones who spent extra time after the study hall period was over to work with us to make sure we would get it right during testing week.

“Support from my fellow Soldiers pushed me to succeed and watching my fellow Soldiers pass their lanes at the end of the day made me more happy than hearing that I passed mine,” Furey said. “Pushing each other to succeed is what EFMB is what it’s all about.”

The culminating event was the 12-mile foot march, which tested the candidate’s physical stamina, state of training and mental attitude.

EFMB Challenge



Army 1st Lt. Devon Furey, masters one of three warrior skills tasks on combat testing lane one March 26, 2018 at Camp Bullis during Expert Field Medical Badge testing. U.S. Army Photo by Robert Shields

Army Spc. Harold Owiti finished the foot march with a time of 2:33:08 making him the first to complete all of the events.

Owiti said the foot march wasn't that tough for him. The most challenging thing for him was the mental aspect of trying to complete the tasks during the EFMB.

"I had to change how I think, so I could make it through," Owiti said. "I'm not going to lie, there were days I felt like I wasn't going to make it, but I have friends, family, my wife. I would talk to them on the phone. People kept encouraging me and putting me in the mindset that I was going to get it and every day I was doing one task at a time."

Command Sgt. Maj. Robert Luciano, senior enlisted advisor of the Defense Health Agency, was the guest speaker at the graduation ceremony.

Luciano began by congratulating the Soldiers who earned their badge. "It's a great day to be a Soldier and it's a great day to be a Soldier Medic," he said.

He praised the Soldiers for their grit as he described his own experience trying to earn the EFMB, which took him three tries to achieve and how he felt after completing the 12-mile road march.

"I would like to say I was walking a little taller and looking a little sharper," Luciano said. "But, honestly I was looking like John Wayne who just got off a horse after riding a hundred miles. I could barely walk and I needed a medic. But I was done with it."

"It was no joke," he said. "That was a test that really put the grit to you."

Luciano encouraged the Soldiers who didn't achieve the EFMB this time to keep trying.

"For those Soldiers who didn't get the badge this time, all I can say is challenge it again," he said. "Never quit, it's not in your DNA to quit, because a combat medic is not going to quit on the battlefield either."

Brig. Gen. Jeffrey Johnson, BAMC commanding general, agreed.

"Successful leadership is not about getting to the goal every time the first time, it's about what you do thereafter," Johnson said. "How you pick up the pieces and learn from what you have

experienced and then move forward."

Johnson said it takes more than excelling in a series of tasks on the CTL's to make Soldiers better medics on the battlefield. It's the grit, determination and attention to detail they learned during the EFMB that will help them succeed.

"Having the badge is more about a confidence that I can accomplish hard things than the prestige of wearing it," said Army Lt. Col. Chad Bangerter, an endodontist at Budge Dental Clinic, who decided to go for the badge because a co-worker challenged him.

This was the first time BAMC has hosted an EFMB qualification event.

"I think it went really well," said Army Capt. Jessie Smith, officer in charge. "I believe we are the first military treatment facility to ever host an EFMB event," she added.

"We have shown that it can be done and we should continue to do this to continue to build leaders and create badge holders," Smith concluded.

EFMB Recipients:

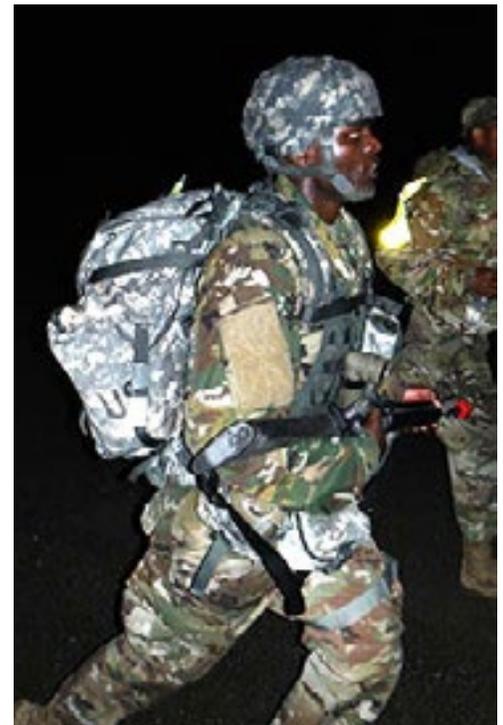
1st Lt. Devon Furey, BAMC Troop Command
 Sgt. Charles Metcalf, BAMC Troop Command
 1st Lt. Christian Lubbe,
 2-149 General Support Aviation Battalion
 Sgt. Kayla Kaniaupio, BAMC Troop Command
 Staff Sgt. Amanda Ortiz-Murphy,
 7306th Medical Training Support Battalion
 Capt. Paul Rosbrook, 187th Medical Battalion
 1st Lt. Joseph Mazarella,
 BAMC Troop Command
 1st Lt. Nicholas Ryan, BAMC Troop Command
 Spc. Harold Owiti, BAMC Troop Command
 Staff Sgt. Randal Blake,
 BAMC Troop Command
 Sgt. 1st Class Adam Montanez Colon,
 188th Medical Battalion
 Lt. Col. Chad Bangerter, Dental Activity
 1st Lt. Johnathan Vargas,
 BAMC Troop Command
 Capt. Jessica Helle, BAMC Troop Command



Army 1st Lt. Devon Furey completes a complex medical and evacuation scenario March 26, 2018 on combat testing lane one during Expert Field Medical Badge testing at Camp Bullis. Photo by Robert Shields



Army Lt. Col. Chad Bangerter, an endodontist at Budge Dental Clinic, instructs Soldiers on the evacuation task March 26, 2018 on combat testing lane one at Camp Bullis during Expert Field Medical Badge testing. U.S. Army Photo by Robert Shields



Army Spc. Harold Owiti marches in the early morning hours of March 28, 2018 at Camp Bullis during Expert Field Medical Badge testing. Owiti was the first to finish the foot march with a time of 2:33:08. Photo by John Franklin

Sinise Brings Invincible Spirit Festival Back to BAMC for 6th Time

BY LORI NEWMAN
Brooke Army Medical Center Public Affairs

Actor, director and musician Gary Sinise, along with celebrity chef Robert Irvine brought the Invincible Spirit Festival back to Brooke Army Medical Center for the sixth time entertaining a record crowd April 5, 2018.

The Invincible Spirit Festival was created to celebrate the courage of wounded service members, their families and caregivers. The festival brings a fair-like atmosphere to military medical hospitals to provide a respite from the rigors of medical treatment, and offer a reminder of hope and positivity during recovery.

This year, thousands of BAMC patients, family members and staff enjoyed food, family-friendly activities and music by Stolen Silver and Sinise and the LT Dan Band.

“You and your fellow service members deserve all of our support,” Sinise said. “We can’t say it enough. We can’t acknowledge what you do for us enough.”

Sinise said he has Vietnam veterans in his family and remembers how they were treated after they returned home and how people turned their backs on them.

“Thankfully I think we learned some lessons and we are more focused today on making sure that you know that we care,” he said.

Prior to the event, Irvine visited the teaching kitchen at the new Vogel Resiliency Center on Joint Base San Antonio-Fort Sam Houston to provide a cooking demonstration for service members and their families. Irvine demonstrated how to prepare healthy food options such as homemade granola and a frittata, and answered cooking questions from the audience and through a live feed on the BAMC Facebook site.

Sinise and Irvine also visited one-on-one with several wounded service members and inpatients before taking the stage at the festival.



Gary Sinise and the LT Dan Band perform during the Invincible Spirit Festival at Brooke Army Medical Center April 5, 2018. Thousands of BAMC patients, family members and staff enjoyed food, family-friendly activities and music by Stolen Silver and Sinise and the LT Dan Band. Photo by Robert Shields

“It can be easy to wonder if the American people recognize what you are doing for our country,” Sinise told the warriors. “But we do.”

Not everyone is cut out to be in the military, he said. “You folks have stepped up and you should be proud of yourselves for what you do.”

Newlyweds Steven and Miriam Cromwell were excited for the opportunity to meet Sinise and Irvine.

“I saw Chef Irvine downstairs, and I asked him to come up to the 7th floor to meet my wife,” Cromwell said. “I was surprised when they actually walked in.”

As Sinise and Irvine walked the halls of the hospital several service members and staff stopped to shake their hands, and thank them for their continued support of the military and BAMC.

“God bless you for serving,” Sinise said. “We don’t take your service for granted.”

Become a Patient & Family Partnership Council Member

Council members provide a voice that represents all patients and families of patients who receive care at military treatment facilities.

They partner with doctors, nurses, and administrators to help improve the quality of care for all.

Join Us!

Together we can work to make our San Antonio Military Treatment Facilities the best they can be!

For more information about being a member or to find out how to apply:

Contact Maria Guerrero | Chief, Patient Experience Branch
phone: 210-916-2330 email: maria.c.guerrero13.civ@mail.mil



Schertz Medical Home Moves to New Location

BY RACHEL COOPER

Brooke Army Medical Center Public Affairs

The Schertz Medical Home is scheduled to move into a larger facility to meet the growing needs of its patient population on April 30, 2018.

The new location will provide the same services to include an expanded physical therapy clinic and a drive thru pharmacy option for phoned-in non-controlled substance refills.

A ribbon cutting ceremony was held on May 2 at 11 a.m. at the new location, 17115 Interstate 35 North, Suite 123.

“The goal of moving to the new location is to grow, expand and be able to see a larger population,” Army Lt. Col. Lori Tapley, family nurse practitioner and chief of the Schertz Medical Home, said.

“At this time we currently have just over 10,000 patients enrolled. Moving to the new location, we will have the capacity to serve more than 15,000 patients with a new third team which includes a Pediatrician,” she said.

In addition, the new physical therapy space will offer a large open gym with state-of-the-art equipment.

“Our pharmacy, just like at the Westover Hills location, will have a drive-thru component and additional pharmacy windows,” Tapley said.

Another benefit is a much larger waiting room with specific waiting areas for the PCMH clinic as well as pharmacy and lab. Patients will no longer have to share a room when waiting for their medications or appointments.

“On any given day we have people standing in our one waiting room,” she said. “Especially on Friday afternoons when everybody is coming to pick-up their refills. Our new location will have more sitting in the waiting areas, so people will be more comfortable.”

Schertz Medical Home hours are Monday-Thursday 7:30 a.m. to 7:30 p.m. and Friday 7:30 a.m. to 4:30 p.m. Lab hours are 7:30 a.m. to 4:30 p.m. Monday-Friday. Pharmacy hours are Monday-Thursday 7:30 a.m. to 7:15 p.m. and Friday 7:30 a.m. to 4:30 p.m.



The Schertz Medical Home is moving into a larger facility to meet the growing needs of its patient population April 30, 2018. Photo by Jason W. Edwards

BAMC Staff...

As the primary occupants of the garage, we play an important role in ensuring the parking areas stay clean.

Working together, we all need to ensure trash is picked up & placed in a trash container.

Please help keep our garage clean



Thank You



BAMC Welcomes New Command Team

BY LORI NEWMAN

Brooke Army Medical Center Public Affairs

Brooke Army Medical Center held a joint change of command and change of responsibility ceremony May 11, 2018 on the hospital's ground helipad.

Brig. Gen. Jeffrey Johnson relinquished command to Brig. Gen. George "Ned" Appenzeller and Command Sgt. Maj. Diamond Hough relinquished responsibility to Command Sgt. Maj. Thomas Oates during the ceremony hosted by Maj. Gen. Thomas Tempel, Regional Health Command-Central commanding general.

"I can't say enough about the team here who makes this institution; the pinnacle of military health care," Tempel said. "The 8,800 military members, civilians and contractors are the heart and soul of Brooke Army Medical Center and the reason for the constant success and the innovative solutions found throughout this medical campus that benefit our military, San Antonio and the entire healthcare industry.

Tempel highlighted the integrated team of Army, Navy and Air Force health care professionals who work at BAMC and the partnerships within Joint Base San Antonio and the San Antonio community. He also spoke about the accomplishments of Johnson and Hough.

I can proudly tell you that the expertise gained through wartime trauma care is being applied to the healing of all those who arrive for care, he said. Even more importantly the incredible spirit of our wounded warriors wanting to get back to their units, their friends and their loved ones, is alive and well, not only in the Soldiers

who come here for care but in the civilians who also pass through our wards.

Brooke Army Medical Center's partnership with this great community and the can-do attitude of the providers and staff at this facility are a direct result of the outstanding leadership this command team brings to Army Medicine.

There is so much more I can say because General Johnson and Sergeant Major Hough have touched the lives of so many while leading this phenomenal organization, Tempel also praised their spouses. "it's the love and support of Paula and Marie that has really made a difference in this organization also." He said, thanking them for their contributions.

Tempel then turned to Appenzeller, welcoming him and his family.

"Ned you are absolutely the right leader at the right time for BAMC, this regional and for military medicine," he said. "In addition to your clinical knowledge and skills you possess all the leadership that is necessary to ensure BAMC continues to excel as an organization. I have the greatest confidence in this command team and your battle buddy Command Sgt. Maj. Oates who is going to bring a wealth of knowledge and experience about our central region. ... His dedication and his focus on taking care of Soldiers is legendary and he's got partnered perfectly with your experience General Appenzeller

"I have the greatest confidence in this command team and I am grateful that they have their families to support them as they assume command.

Later this month Johnson will replace Tempel as commanding general of RHC-C.



Maj. Gen. Thomas Tempel, Regional Health Command-Central commanding general, passes the colors to incoming Brooke Army Medical Center commander Brig. Gen. George "Ned" Appenzeller May 11, 2018 during a simultaneous change of command, change of responsibility ceremony on the hospital's ground helipad. Brig. Gen. Jeffrey Johnson relinquished command to Appenzeller and Command Sgt. Maj. Diamond Hough relinquished responsibility to Command Sgt. Maj. Thomas Oates during the ceremony. U.S. Army photo by Robert Shields

INTRODUCING...

BAMC's Reusable Take-Away Food Container Program

HOW IT WORKS

- 1 Ask for a re-usable takeout container when purchasing food.
- 2 Pay \$5 fee for initial container.
- 3 Return used container to vending machine & receive a token.
- 4 Nutrition staff remove soiled containers and wash for re-use.

CHOOSE TO REUSE

Undersea & Hyperbaric Medicine Clinic Receives 4 Year Reaccreditation

BY LORI NEWMAN

Brooke Army Medical Center Public Affairs

The Undersea & Hyperbaric Medicine Clinic at Brooke Army Medical Center received 4-year reaccreditation with distinction from the Undersea & Hyperbaric Medical Society April 10, 2018.

“Achieving this significant milestone reflects you and your organization’s commitment to excellence,” stated a letter from Derall Garrett, UHMS director, to Air Force Col. (Dr.) Michael Richards, Undersea & Hyperbaric Medicine Service chief, here.

“The surveyors were impressed with our comprehensive checklists and checklist discipline,” Richards said. “All three surveyors were generally extremely impressed with the physical structure, the staff, and our operations.”

UHMS is an international nonprofit association formed in 1967, which serves about 2,000 physicians, scientists, associates and nurses from more than 50 countries in the fields of hyperbaric and dive medicine.

The Joint Commission and UHMS have a complementary accreditation agreement. Under the agreement, hyperbaric medicine is still responsible for maintaining TJC standards.

A UHMS Accreditation means the facility has met the highest standards of care and patient safety through a rigorous evaluation of the adequacy of your facility, equipment, staff and training to ensure that the utmost quality is maintained within the specialty.



Army Capt. Kyle Salik is the first patient to receive oxygen therapy at the new Undersea & Hyperbaric Medicine Clinic at Brooke Army Medical Center June 20, 2017. Hyperbaric Oxygen can be used to treat 14 different indicators including wound healing. U.S. Army Photo by Robert Shields

The Accreditation Council of the UHMS has a new set of objective criteria that must be met for a hyperbaric facility to be accredited “With Distinction.” For a hyperbaric facility to be accredited WD, the facility must achieve a minimum score of 6 out of the available 10.5 points.

“I’m very proud of the work my folks have done.” Richards said. “We have a tradition of earning accreditation with distinction, but this survey was extra special since we had the challenge of moving to a new facility and the criteria for achieving the ‘with distinction’ designation are more stringent.”

The clinic houses a multi-person chamber to accommodate up to six patients at one time. It is pressurized with air and patients breathe oxygen underneath a hood or with a mask. Generally, a treatment plan will consist of 90 minutes of hyperbaric oxygen daily for six weeks or more. While in the chamber, patients can recline in a comfortable chair and watch TV or read.

A single chamber is also available for an individual patient to receive treatment. The facility was built so that an additional multi-person can be added if needed in the future.

According UHMS, hyperbaric oxygen is an intervention in which an individual breathes nearly 100 percent oxygen while inside a hyperbaric chamber that is pressurized to greater than sea level pressure.

Hyperbaric chambers and hyperbaric oxygen therapy have been in use for centuries, but it wasn’t until the early 1930s that the military developed and tested hyperbaric oxygen for purposes specifically in the area of deep sea diving and later in aeronautics.

The hyperbaric mission moved from Wilford Hall Ambulatory Surgical Center to BAMC in June 2017.



Air Force Staff Sgt. Maribel Cortez, certified hyperbaric technician, places the oxygen hood on Christen Hesser to demonstrate how a patient would receive oxygen therapy in the multi-person chamber at the new Undersea & Hyperbaric Medicine Clinic at Brooke Army Medical Center June 13, 2017. If the patient is not comfortable with the hood, they can also wear a mask to receive their treatment. U.S. Army Photo by Robert Shields



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BAMC Receives Accreditation as Centering Pregnancy Site

BY LORI NEWMAN

Brooke Army Medical Center Public Affairs

Brooke Army Medical Center was accredited by the Centering Healthcare Institute as a CenteringPregnancy site in June 2018.

According to the Centering Healthcare Institute website, CenteringPregnancy decreases the rate of preterm and low weight babies, increases breastfeeding rates, and leads to better pregnancy spacing. Engaging activities and facilitated discussions help patients to be more informed, confident and empowered to make healthier choices for themselves, their children and their families.

“The whole goal of centering is to provide support through group sessions for pregnant women and their partners so they get rich discussion and evidence-based education,” Air Force Lt. Col. Kristi Norcross, certified nurse midwife.

“Nationally, Centering group prenatal care is very popular and it’s becoming a growing trend in the Military Health System,” Norcross explained. “To maintain the certification and the training is rigorous, but once you have the training completed and the program established the costs are significantly less.”

BAMC began using the CenteringPregnancy model in May 2017 and since then more than 170 women have completed the program. On average, there are about 8 to twelve patients per group with multiple groups running simultaneously at various gestational ages.

The expecting mom starts in a centering group at the beginning of her prenatal care and remains in the group until she delivers. Each group has a reunion about six weeks after their delivery dates where birth stories are shared and memories are captured in photos.

Agnieszka Chauviere decided to join the centering group because she was new to the military family and to San Antonio.

“I thought it would be a good idea not only to have good prenatal care but also to meet new people at a similar stage in life,” she said. “I attended the first session and met with a group of great women and providers. I enjoyed it a lot.”

Most of the classes were attended by



husbands or partners which helped to build understanding, better communication and solid relationships within the family, Chauviere added.

Books are provided to the participants so they can review the topics that will be discussed and prepare questions for the group facilitator or the provider. At Brooke Army Medical Center, facilitators are midwives, women’s health nurse practitioners, residents and obstetric doctors.

“My favorite session included the tour of Labor and Delivery,” she said. “It was very helpful to see the rooms’ appearance and the available equipment likely to be used during labor. It helped me feel more prepared and confident.”

Chauviere said the group was very supportive when she shared news about another health-related issue she was dealing with during her pregnancy.

“Many women in the group turned out to have other health-related challenges now or in the past, and my honesty helped them to open up with the group,” she said. “As a result, some reached out with offers of support, and new friendships were formed.”

Norcross agrees. “Our Centering facilitators co-manage high risk patients with Maternal Fetal Medicine or Obstetricians, so all pregnant women can share in this model of care and benefits.”

“If you think about our unique population of military families, sometimes they don’t have family or community support, so centering offers the women an opportunity to share their knowledge with each other,” the nurse midwife said. “As a result, a lot of friendships are developed that last a lifetime.”

The program has proved to be beneficial for the expectant families and military medicine, Norcross noted.

“In Texas the average rate for preterm births is 10 percent as compared to our Centering participant average was only 5 percent from May 2017-2018,” she explained. Preterm birth is when a baby is born prior to 37 weeks. The estimated cost savings for BAMC in 2017 was more than \$275,000.

“It is a huge advantage to the community of beneficiaries for Brooke Army Medical Center to offer a centering model of care,” Norcross said.

BAMC is one of 10 medical treatment facilities working toward and earning accreditation.



Agnieszka Chauviere holds her daughter Emilia Jennifer. Chauviere decided to join the centering group because she was new to the military family and to San Antonio. Courtesy photo.



BAMC Earns The Joint Commission's Gold Seal of Approval

BY LORI NEWMAN

Brooke Army Medical Center Public Affairs

Brooke Army Medical Center has earned The Joint Commission's Gold Seal of Approval for accreditation by demonstrating continuous compliance with its performance standards. This accreditation is a reflection of the organization's commitment to providing safe and effective patient care.

The Joint Commission accredited BAMC under two standards: the hospital standard and the behavioral health standard. Additionally, BAMC attained its first certification for Primary Care Medical Home by TJC. The three-year accreditation and certification award recognizes BAMC's dedication to continuous compliance with The Joint Commission's standards for health care quality and safety.

"The survey team was unanimous and profuse in their compliments on the teamwork, skill, compassion, professionalism and passion to learn exhibited by all of our staff members," said BAMC Commanding General Brig. Gen. George Appenzeller.

BAMC facilities underwent the rigorous unannounced on-site survey in June 2018. A team of Joint Commission expert surveyors evaluated the hospital and the outlying clinics for compliance with standards of care specific to the needs of patients, including infection prevention and control, leadership and medication management.

TJC's hospital standards address important functions relating to the care of patients and the management of hospitals. The standards are developed in consultation with health care experts, providers, measurement experts and patients.

"The Department of Defense requires all military treatment facilities to maintain a civilian accreditation," said Air Force Col. Nicola Choate, deputy to the commander for Quality and Safety.

"Accreditation is a periodic external evaluation by recognized experts that provides impartial evidence of the quality of care, treatment or services delivered to the individuals we serve."

The Primary Care Medical Home certification focuses on care coordination, access to care and how effectively a primary care clinician and the interdisciplinary team work in partnership with the patient and family.

"We did exceptionally well," said Lori Barteau, chief of the Department of Quality Services. "We earned a three-year accreditation and certification and we had very few findings."

The majority of the findings were of a low limited risk and not related to patient care. The surveyors also acknowledged the organization for many "best practices," which they observed during the five day survey.

The survey team encouraged BAMC lead-



ership to submit five programs to the Joint Commission Leading Practice Library. The Leading Practice Library provides a resource for organizations to leverage BAMC's recognized efforts for consideration and adoption to their own services.

"One of those identified best practices was the point-of-use processing of reusable instruments," Barteau said. "Infection prevention and control practices are one of the most common findings globally for TJC."

The survey team also praised the Residential Treatment Facility staff for their integrated approach to treatment, which includes patient education, individual and group psychotherapy, recreational and occupational therapy and functional restoration.

Barteau credited the entire staff for their compassion and dedication.

"The entire staff worked very hard to put programs into place, to sustain those programs and to ensure that not only did they meet The Joint Commission standards, they exceeded them," she said.

"I am very proud of what our entire team has accomplished over the past months to prepare for this survey. The outstanding results exemplify the care, compassion, and dedication of the BAMC family to all of those we serve," Appenzeller said.

Founded in 1951, The Joint Commission seeks to continuously improve health care for the public, in collaboration with other stakeholders, by evaluating health care organizations and inspiring them to excel in providing safe and effective care of the highest quality and value. The Joint Commission is the nation's oldest and largest standards-setting and accrediting body in health care.



Sgt. Anthony Dimaio, noncommissioned officer in charge of Neuro Surgical Intensive Care, prepares to clean a pair of surgical scissors using a point of use kit Sept. 12 at Brooke Army Medical Center. The kit is used to remove debris from instruments at patient bedside before being sent for sterilization. Photos by Jason W. Edwards



BAMC Maintains Long-Standing Accreditation From Commission on Cancer

BY LORI NEWMAN

Brooke Army Medical Center Public Affairs

Brooke Army Medical Center maintains multiple accreditations in an effort to ensure patients receive the safe, high quality care they deserve. One of the longest standing accreditations, more than 68 years, is from the Commission on Cancer, a program of the American College of Surgeons. BAMC received reaccreditation in August 2018.

The Commission on Cancer is a consortium of professional organizations dedicated to improving survival and quality of life for cancer patients through standard-setting, prevention, research, education and the monitoring of comprehensive quality care.

According to their website, the CoC recognizes cancer care programs for their commitment to providing comprehensive, high-quality and multidisciplinary patient-centered care.

“Accreditation by the Commission on Cancer assures patients that BAMC maintains high standards in cancer care, equivalent to what they would receive in any civilian institution accredited by the CoC,” said Army Lt. Col. (Dr.) Garth Herbert, surgical oncologist and chair of the BAMC cancer program. “Furthermore, compliance with CoC standards guarantees that patients will be treated with a multidisciplinary, team approach for their cancer, and one that adheres to national, evidence-based guidelines.”

All CoC accredited facilities offer assistance with navigating the complexities of cancer care, genetic assessment and counseling when indicated, information regarding clinical trials and appropriate surveillance following cancer treatment.

BAMC’s accreditation falls into the Academic Comprehensive Cancer Program category. To maintain this designation, BAMC must participate in postgraduate medical education in at least four program areas, including internal medicine and general surgery. The facility must treat more than 500 newly diagnosed cancer cases each year, and offer the full range of diagnostic and treatment services either on-site or by referral. The facility must also participate in cancer-related clinical research either by enrolling patients in cancer-related clinical trials or by referring patients for enrollment at another facility or through a physician’s office.

BAMC offers multiple support groups throughout the year to provide



Air Force Capt. (Dr.) Lauren Lee examines Faunia Rodriguez at the Brooke Army Medical Center Hematology/Oncology Clinic Nov. 6, 2018. U.S. Army photo by Lori Newman

patients and family members the support they need when faced with a serious illness. Support groups topics range from Life After Cancer Diagnosis, Caring for Caregivers and Coping with Loss, to name a few.

The cancer committee at BAMC consists of a diverse, multi-disciplinary group of professionals from all areas of cancer care.

“Optimal care of cancer patients demands close collaboration between the various departments involved, to include Surgery, Hematology Oncology, and Radiation Oncology, as well as numerous supportive services to include Radiology, Pathology, and Physical Therapy to name just a few,” Herbert said. “At BAMC, a comprehensive treatment plan is decided upon during multidisciplinary conferences that involve representatives from each of the treating services. This team-based approach is critical to ensuring our cancer patients have the best possible outcomes.”

Faunia Rodriguez said she believes the care she is receiving at BAMC is comparable to any top cancer facility in the country.

“I’ve been treated very well, respectfully,” she said. “I feel like they are giving me the best chance I can have at beating this (cancer).”

Rodriguez said she likes the team approach the doctors have taken with her care. “They all work together.”

BAMC Tests Emergency Capabilities During City-Wide Exercise

BY LORI NEWMAN

Brooke Army Medical Center Public Affairs

Brooke Army Medical Center received 42 “patients” made up in moulage to depict a wide range of injuries Oct. 11, 2018 during the largest city-wide San Antonio Mass Casualty Exercise and Evaluation to date.

Nearly 700 volunteers and role players acting as victims, friends and family members participated in the annual exercise designed to assess the surge capabilities of the hospitals in the South Texas region under the Southwest Texas Regional Advisory Council umbrella.

SAMCEE specifically tests the region’s capabilities to respond to a mass casualty incident by assessing patient reception procedures, treatment processes, and the ability to track patients within the system.

“This is an important opportunity to ensure our readiness in case of a mass casualty incident as well as build on relationships with our community emergency response partners,” said Air Force Col. (Dr.) Patrick Osborn, deputy commander for surgical services. “At BAMC we value these training opportunities that underscore the importance of mission readiness and help ensure we’re prepared to serve anytime, anywhere.”

“Exercises like this are critical for preparation for real world events such as the Sutherland Springs shooting,” Osborn added.

The scenario for this exercise was mass shooting involving explosives at Freeman Coliseum in downtown San Antonio. At BAMC an additional scenario involving a tanker truck containing a chemical agent colliding with a bus carrying patients was added to test the hospital’s ability to decontaminate patients before treatment.

“Exercises such as this are important for our

daily operations because we never know when the next mass casualty event is going to be,” said Army Lt. Col. (Dr.) Scott Trexler, BAMC trauma medical director. “As a Level I Trauma Center we, along with our partners at University Health, represent the highest level of response for the traumatically injured patient in South Texas so it’s important that we know our system is ready for these no-notice events regardless of when or where they may occur.”

The BAMC trauma mission is unique as the Department of Defense’s primary readiness platform for more than 8,800 personnel who work together to hone their ability to care for patients and sustain wartime trauma care skills.

BAMC evaluates more than 4,000 trauma patients each year. Over 90 percent of those are civilian trauma patients from the local community.

“The benefit of training here (at BAMC) is that we work together as a team,” Trexler said. “Every day we are taking care of traumatically injured patients. This allows our team to work together doing the things they are going to be doing downrange.”

STRAC, whose members include hospitals, health systems and EMS agencies, organized the annual exercise. STRAC has responsibility under state law for planning and coordinating emergency care within a 26,000 square-mile region in South Texas.

“Doing this with our partners benefits the community as a whole,” Trexler said, explaining that the exercise tests the system on many levels, including making sure the right patients are sent to the right location at the right time.

“This is certainly a key to preparation for an event that may affect San Antonio or southern Texas. It allows us to ensure that we have the resources and the skills available to respond to something like this,” Osborn said.



Members of Brooke Army Medical Center’s medical staff simulate providing emergency care to an exercise role player during the 2018 San Antonio Mass Casualty Exercise and Evaluation at Brooke Army Medical Center Oct. 11, 2018. SAMCEE is an annual exercise designed to test the capabilities of hospitals and emergency responders in the San Antonio area. Photo by Jason W. Edwards



Members of Brooke Army Medical Center’s medical staff assist an exercise role player during the 2018 San Antonio Mass Casualty Exercise and Evaluation at Brooke Army Medical Center Oct. 11, 2018. Nearly 700 volunteers role-played as victims and family members during the largest mass casualty exercise ever held in San Antonio. Photo by Jason W. Edwards



Steven Burton, emergency manager, briefs members of the Emergency Operations Center during the 2018 San Antonio Mass Casualty Exercise and Evaluation at Brooke Army Medical Center Oct. 11, 2018. The exercise simulated an active shooter scenario to test the capabilities of hospitals and emergency responders in the San Antonio area. Photo by Jason W. Edwards



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