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Remembered



THE TAMC CADUCEAN

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

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Tripler achieves Level II Trauma Center status by the American College of Surgeons, with zero deficiencies

By Leanne Thomas

HONOLULU – Tripler Army Medical Center recently received official verification as a Level II Trauma Center by the American College of Surgeons (ACS), the verifying organization for trauma, effective Feb. 28, 2019.

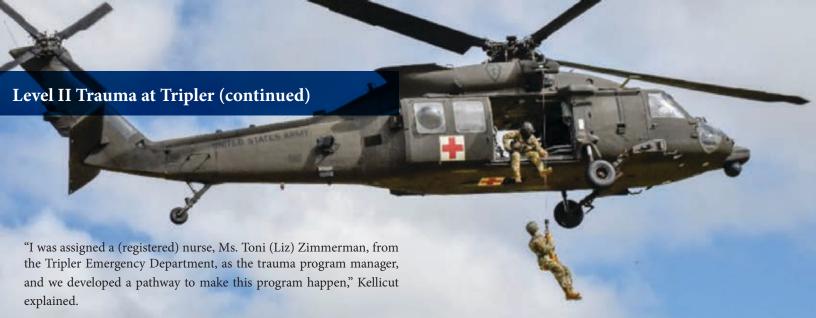
The military treatment facility began the process of becoming certified as an ACS Level II Trauma Center in 2016 based on the FY17 National Defense Authorization Act (NDAA) signed into law in December 2016 to direct significant changes to the Joint Health Services Enterprise, to include "Trauma Care."

"The U.S. Army Chief of Staff Gen. Mark A. Milley directed the Army to focus on readiness, and for Army Medicine, readiness comes in the form of a 'Ready Medical Force,' where trauma care is projected anywhere in the world," stated Col. Dwight C. Kellicut, trauma medical director, Tripler Army Medical Center. "To ensure all members of the medical team are ready to deploy and carry out that mission, the NDAA of 2017 directed all military medical centers to achieve either a Level I or Level II Trauma Center status."

Kellicut, an active-duty U.S. Army vascular surgeon, has numerous roles and responsibilities within Tripler, U.S. Indo-Pacific Command (USINDOPACOM), and the State of Hawaii. In addition to serving as the trauma medical director at Tripler, he also serves as the director of academics, research, and training for Tripler, the USINDOPACOM trauma consultant, and chairman for the State of Hawaii Trauma Advisory Council.

"Col. Kellicut is very humble, and he is so well regarded in Hawaii that he was elected by state shareholders as the chairman of the Hawaii Trauma Advisory Council," stated Col. Mary V. Krueger, commander, Tripler Army Medical Center. "He was the ideal person to lead this institution-wide effort. Achieving the Level II Trauma Center status enhances our position as a readiness platform and our ability to serve the Oahu military community."

Having just returned from a 2016 deployment in North Sinai Egypt, Kellicut was assigned the task of converting the treatment facility into a Level II Trauma Center.



That same year the initial two-person team began the first of a three-phased approach starting with gaining support from members of the command, community partners, and the State of Hawaii Department of Health.

"A lot of people look at readiness as getting surgeons ready to go down-range, but what we have to look at is training the entire platform, making sure our medics, our 'techs,' our nurses, our surgeons, our primary care providers – everyone has that shared mental model of what it's going to take to care for the trauma patient," said Kellicut. "And Level II Trauma accomplishes this."

In January 2017, members of the ACS came to Hawaii for a stateside visit and specifically mentioned in their final report that a second Level I or Level II Trauma Center was needed for the State of Hawaii, and Tripler would ideally fill that role.

Phase II was mainly conducting a business case analysis which consisted of 55 hospital-wide meetings over a six month period to gain critical support at the clinical, service, department, and deputy level. To create a shared mental model for trauma, Kellicut developed and employed a simulation curriculum called Trauma System Assessment Training (TSAT).

Kellicut explained, "Once we completed the business case analysis, we entered into Phase III and began the one year verification period with a scheduled site visit for February 27-28, 2019."

During the verification phase, the ACS requires developing trauma centers to collect data on every aspect of the program. Trauma outcomes at Tripler were closely monitored through the Performance Improvement Patient Safety Program (PIPS), which is a multi-disciplinary group of trauma stakeholders who meet monthly to review outcomes, peer review, trauma system review, and continuing medical education.

The ACS Level II Trauma Center verification process reviews every aspect of the trauma program as defined by the ACS Resources for Optimal Care of the Injured Patient, known as the "Orange Book," which lists over 400 criteria that must be met without exception to achieve verification.

"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," said Kellicut. "Ancillary support from the blood bank, laboratory, radiology, interventional radiology, and rehabilitative services are equally critical," he added.

At the midpoint of the verification year, Tripler underwent a Mock ACS Trauma Survey in July 2018 to determine what was going well in the trauma program, and what needed improvement.

"Overall, the survey went very well and collectively as a team we had much to be proud of. We had positive feedback about the 2018 Rim of the Pacific (RIMPAC) 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," Kellicut said. "There were some identified areas that needed improvement, but the Tripler Trauma Program members actively worked with each department throughout the hospital to maintain the current initiatives as well as to build upon them to ensure alignment with criteria for ACS Level II Trauma verification."

During the final site visit in late February 2019, Tripler achieved their goal of becoming the only ACS Level II verified Trauma Program in the State of Hawaii. The visit marked the culmination of two years of work across the organization to achieve this status to support U.S. Army – Hawaii, Military Medicine, Joint Partners, and the local community. The surveyors reported zero deficiencies and commended the team on their commitment, professionalism, and execution of standards.

"This is an enormous accomplishment for Tripler, but it also comes with an enormous amount of responsibility, not only to our uniformed personnel, dependents, retirees, and our VA beneficiaries but also to our community," stated Kellicut.

This achievement recognizes Tripler's dedication to providing optimal care for injured patients and serves as an ideal readiness platform to ensure all members of the medical team are prepared to care for those in harm's way.

"Level II Trauma at Tripler is an extraordinary process and opportunity. There has been much work to get us to where we are, and we will continue to be inspired by our trauma motto, "A'ohe hana nui ke alu 'ia," translated as, "No task is too big when done together." 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," Kellicut said.

TAMG NEWS





The search for Tripler Talent

By Jim Goose Guzior

I remember Col. Krueger's Change of Command ceremony when two Tripler Soldiers performed the National Anthem. One Soldier played the ukulele while the other sang to the crowds gathered. As the first strums of the ukulele began, the innocent island sounds coming from the stringed instrument echoed beautifully off the pink outer walls of Tripler. As the singer began, his voice came together with the music in perfect pitch and harmony. For the first time, after being around military ceremonies for almost 27 years, I was mesmerized by the performance of the National Anthem. The performance was understated, simple and just plain beautiful. When the duet finished their rendition, the audience couldn't help but burst into applause. Even after the ceremony, many guests commented about the wonderful performance. The performance was unique because they were not members of the band or from another unit. The duet came right out of the Tripler staff!

It reminded me that a few years ago, we held a unique Patriot Ball for Tripler where our staff provided the entertainment. We had musicians, singers, dancers and all kinds of talent that showed up for this event. As the years went on, some of this staff retired, some departed and others moved on with their careers to other duty stations. Over the years, it has grown more difficult in identifying the talent around Tripler, but when we do, it's usually something pretty special like the duet that performed last summer for the change of command ceremony.

With the Command's blessing, our office sent out an invitation for talent over the TAMC 360. We are trying to identify the people with extraordinary talents around our staff. We are looking for those with a great voice for narration or reading for ceremonies. We are looking for singers who might help us with the National Anthem and groups that can perform during lunchtime observances or over holidays. Your group can be vocal or with instruments. Perhaps you have studied the art of hula dancing and can perform for our staff and visitors as well.

No matter what your talent, we'd like to see it! Send us a video of your talent from YouTube, and if you're good, we will make contact with you to join the Tripler Talent Club. Perhaps your talent might not fit into ceremonies but may be perfect for lunchtime entertainment during holidays or for visitors.

Don't be shy; let us know what you can do and let us find the venue to showcase your talent. Many thanks to all that have sent us videos already, we are reviewing these right now and hope to showcase some of that Tripler Talent soon.

Email submissions to: james.b.guzior.civ@mail.mil



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



STAY CONNECTED



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TAMC Twitter

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TAMC Instagram

www.instagram.com/TriplerArmyMedicalCenter



TAMC Zenfolio

www.TriplerArmyMedicalCenter.Zenfolio.com



TAMC on DVIDS
https://www.dvidshub.net/unit/TRIPLER-AMC



* NEW Content Management System

Members of the Information Management Division at Tripler Army Medical Center developed a new Content Management System (CMS) in SharePoint that includes user-friendly features for the staff to better manage their department webpages.

The former Java based system was developed over 10 years ago and prompted re-evaluation. The system was deemed out of date and required a revamp to support the current management process.

"We are phasing out our remaining Java applications for multiple reasons, so incorporating the new system into SharePoint became the ideal solution," said Nick Haraguchi, IT Specialist, Systems Support Branch, IMD, TAMC.

At the time CMS was initially developed, previous SharePoint versions did not provide sufficient workflow capabilities to support the content management process.

As SharePoint was also recently rebuilt, it was able to support similar content management processes.

"Instead of having our developers build another custom application, I created the system using SharePoint," explained TAMC Webmaster John Ignacio. "What I wanted to improve was the visibility of the process for all TAMC staff, not just Content Managers."



The Content Management Process - Team Effort!

The External Web Content Management page was created to help ensure that information posted on TAMC's public website is appropriate, accurate and current.

- ► Every page on the public web is assigned to a content manager (CM) within TAMC departments.
- ➤ The CM is responsible for ensuring the accuracy and currency of the posted information.
- ► The PAO is responsible for ensuring the posted information is appropriate.
- ► The TAMC Webmaster is responsible for ensuring that each page is formatted properly.

* NEW FEATURE

The new CMS allows the entire staff, not just the Content Managers, to view an information page to better understand the process for updating the TAMC public website. Only Content Managers can post new items, but everyone can read the updates.

CONTENT MANAGEMENT SYSTEM on SharePoint: https://tamcsp.med.ds.osd.mil/cms/default.aspx

* NEW FEATURE

A list of the current content managers for each webpage, as well as the alternate is now available so all staff members know who to send web updates to within their departments.

 $Content\ Manager\ List: \underline{https://tamc-sp.med.ds.osd.mil/cms/Lists/Content\%20Manager\%20List/AllItems.aspx}$

"Previously, this list was not accessible to everyone," explained Ignacio. "I also added a spot for an alternate Content Manager (for every webpage) as there was only one per page."

"This became an issue when the one user would leave and the role was not assigned to anyone else," Ignacio added.

With this feature all staff can now check to see if their webpage has a current content manager. Department chiefs can then assign a new content manager and an alternate to ensure their webpages remain up to date.

"This list is still a work in progress as some pages still do not have an assigned Content Manager," added Ignacio.

* NEW FEATURE

Attachments are not limited to just word, Content Managers can attach images, pdfs, whatever they need to add to their department's webpage.

* NEW FEATURE

Notification emails will be sent to both the Content Manager and the alternate every four months to check their webpage and update the information if needed. If no updates are needed, send the webmaster an email to confirm. After six months, three additional emails will be sent to the Content Managers to check content. If no one is managing a webpage, consideration will be made to determine if the site is truly needed.

Content Management Tip

Departments and their respective sections should view their TAMC public site information for accuracy and currency. If something needs to get updated, use the Content Management System site to find out who the current content manager is. If no one is listed, the department/section chief can assign the role.



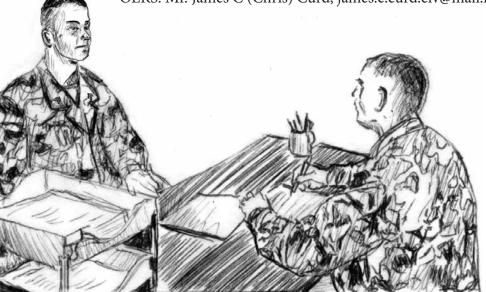
aloha,

Summer is here, and with the hustle and bustle of Soldiers and their Families preparing to PCS, TAMC Human Resources Division (HRD) would like to share some valuable information to help our Soldiers requiring an OER/NCOER.

- Departments are responsible for updating the Companies and HRD of any changes within their rating schemes. This is crucial for accuracy of multiple reports and helps to ensure effective communication between our leadership.
- In accordance with Army Regulation and DA Pamphlet 623-3, support forms are to be updated with the Soldiers current rater (supervisor) and senior rater. Accomplishments should be added to the support form as they occur over time and discussed with counseling. This will assist you in the final development of your evaluation.
- Another implemented Tripler requirement is both delegation and permissions with your evaluation to HRD evaluation POCs. HRD personnel should be delegated within EES by each service member in order to perform a technical review of each evaluation prior to being submitted to HQDA G1. These three permissions are vital to eliminating the possibility of any OER/NCO-ER from being returned for correction(s) by HQDA.
- NCOERs for SFC and above are required to be reviewed by senior enlisted leadership (MTF CSM) no later than 30 days prior to submission in order to receive guidance and recommendations.
- Evaluations are due to HRD no later than the thru date, for submission to HQDA G1.

HRD points of contact for evaluations include:

NCOERs: Mrs. Lokelani Mitchell, lokelani.e.mitchell.civ@mail.mil or (808) 433-8677 OERS: Mr. James C (Chris) Curd, james.c.curd.civ@mail.mil or (808) 433-6649





Benefits of Bariatric Surgery with Maintained Weight Loss

- ► Remission of type II Diabetes
- ► Reduced stroke risk
- ► Reduced risk for cardiac events
- ▶ Joint pain relief

- ► Improved fertility
- ► Alleviated sleep apnea
- ► Improved life expectancy

Eligibility for Surgery

- 1. BMI equal to or greater than 40
- 2. BMI between 35-40 with at least one qualifying co-morbidity:
 - Hypertension
- Diabetes
- Hyperlipidemia

- ◆ Severe Arthritis
- Sleep Apnea
- GERD

- ◆ Liver/Kidney disease
- 3. BMI between 30-35 with a diagnosis of Dysmetabolic Syndrome X or difficult to control Type II Diabetes Mellitus.

Eligible patients may have their primary care providers place a consult for the General Surgery outpatient clinic. Consults should state interest in bariatric surgery. Patients will then be scheduled for a bariatric info session where surgery options are discussed in detail along with pathway to surgery requirements. Preparation for bariatric surgery involves a thorough medical evaluation, education, psychological evaluation, and nutrition counseling. For more information please contact our Bariatric Surgery Coordinator Angela Nguyen, RN at 433-3480.





The Junior Enlisted Council has designated new executive members and is taking over (again)



MISSION: To promote selfless service, leadership, volunteerism, professional development, social outlets, and the mutual exchange of knowledge through Junior Enlisted Soldiers in order to positively impact TAMC and the community at large.

VISION: To shape the future of Army Medicine by developing leaders today through the Junior Enlisted

Why they got involved...

"For me, I actually needed JEC's help for an event. I was really passionate about hosting a bone marrow drive, and I was looking for support for making that a reality. I kept hearing that this group helps every organization (within TAMC) in anything that they needed. So then I wanted to become more involved with JEC, and I started with the Trunk or Treat, and from there it was an opportunity to get outside my section and really get to do something that makes me feel good, which is to give back."

- SGT Darcie Betchy, JEC Professional Development Trainer

"That's how I got involved; I saw people out there doing things outside of their regular job/departments ... giving back to enhance the organization. We are also able to help out with relief efforts. For example, last year when Puerto Rico had a devastation we were able to come together and raise funds for some of the people in our own footprint because their family members were impacted."

- SPC Cameron Thomas, JEC President

"When I met the group I noticed how motivated they were to volunteer and get things done. I googled JEC and TAMC has a page that says 'JEC taking over.' And the story behind that is someone from the company started a 'Back to School' (event), and I thought, 'I want to be a part of this group."

-SGT Jessy Garcia, JEC Vice President



"I'm putting together a flight warrant officer packet, so when I heard about JEC, and essentially all of the programs they support, I realized these are the 'front runners,' or the 'Tip of the Spear' for TAMC. And the way TAMC seems to operate is ... I have four other service members in my clinic, so there is not a lot of interaction at the company level or higher than that, so working with this group is a good way to affect the larger picture on the footprint here, other than through the clinics."

- SGT Craig Ochocki, JEC Treasurer

"I'm not involved in JEC, but I reach out to them for advice oftentimes ... As far as the opportunities that JEC offers - professional development, mock boards, things to get ready and prepare myself and other Soldiers on how to get promoted ... to know that information is very useful for the other committees within TAMC. I think it gives us a platform to be a voice for the program and for other Soldiers. It's a way to have interactions with our leadership, more often to get the point across from the junior level to where it needs to be ... on all scales, issues, everything."

SPC Sadora Murphy, BOSS Treasurer

About JEC

JEC was established in 2016 and allows Soldiers in the ranks of private to sergeant the opportunity to have a voice in what they want to see as changes are made to their organization.

The group has solicited senior NCO's to give classes on a number of subjects and is known for the annual "Apple Tree" fundraiser, where volunteers can choose a child's name off the tree and purchase back to school supplies for that child in order to assist those Soldiers who may have large families or need a little help in purchasing the lengthy list of required back to school supplies.

THIS YEAR'S EVENTS

- ► Back to School Drive
- ► Trunk or Treat
- **▶** Jingle and Mingle
- ► Holiday Barracks Party at the Fisher House
- **▶** Soldier Professional Development
- ► NEW! Soldier Retreat
- ► NEW! Better Opportunity for Single Soldiers



NURSING GRAND ROUNDS





2019 Calendar





January ONLINE

Topic: EKG Part 1 & EKG Part 2 Source: SWANK Online Part 1 #33018 Part 2 #33118

CNE's: 1.5 + 2.0

February FACE TO FACE

Date/Time: 07FEB, 1130-1230 Location: 10th floor conference room Topic: Horizontal Violence in Military

Nursing by COL Hopkinson

CNE's: 1.0

March ONLINE

Topic: Customer Service for Healthcare

Workers: BE NICE

Source: SWANK Online (#34117)

CNE's: 1.5

April ONLINE

Topic: Cancer & Chemotherapy: Admin, Side Effects, Complications, & Oncologic

Emergencies

Source: SWANK Online (#31917)

CNE's: 1.5

May FACE TO FACE: Nurse' Week

Date/Time: 02MAY, 1130-1230
Location: 10th floor conference room
Topic: Improving Communication &
Teamwork in the Workplace by MAJ Cowles

CNE's: 1.0

June ONLINE

Topic: Seizures and Postictal Care Source: SWANK Online (#34718)

CNE's: 1.5

July ONLINE

Topic of Your Choice Source of Your Choice

Please send your 1.0 CEU or more and

specify your workplace/unit to

hoperenee.b.hashimoto.civ@mail.mil

August FACE TO FACE

Date/Time: 01AUG, 1130-1230
Location: 10th floor conference room
Topic: Nursing Documentation & Medical
Claims by Kathy Morphis and Tiffany Sterbis

CNE's: 1.0

September Annual Survey

Topic/Presenters: None

VA/TAMC facility-wide survey to be sent

out for 2020 NGR topics

October ONLINE

Topic: Conflict: Don't Eliminate it, Manage

It

Source: SWANK Online (#310216)

CNE's: 1.0

November FACE TO FACE

Date/Time: 07NOV, 1130-1230 Location: 10th floor conference room

Topic: Obstetrics Topic TBD by TAMC Clinical

Nurse Midwife CNE's: 1.0

December ONLINE

Topic: Prevention of Falls in Older Adult

Source: SWANK Online (#37618)

CNE's: 2.0



NEED CHILD CARE???



TRIPLER FAMILY CHILD CARE OPENS 4/15/2019

Accepting Children of TAMC (Military & DOD Civilian) Employees Only

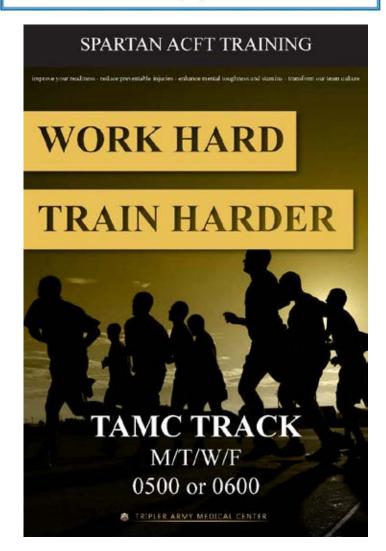
Hours of Operation: 0630-1700

Ages: 19 months - 5 Years

Get on the Waitlist at MILITARYCHILDCARE.COM

*Search for FCC Provider Tripler Army Medical Center

FCC Office (808) 655-1521









Ryan Oshiba, UH Manoa Dietetic Intern MAJ Christin Jessen, MS, RD, CDE

Adequate hydration is essential to health and performance. Unfortunately, many people aren't drinking enough, especially in hot and sunny Hawaii. How much water do you drink daily? Try to aim for at least 64oz or more of water per day (most adults need even more). Carrying a water bottle or making infused water can help increase intake. Remember

that you must sip on liquids throughout the day to absorb them. Chugging water is just like watering a dry house plant; anything that you can't absorb at that time will run through you (think about how quickly you need to urinate after downing lots of water prior to a urinalysis).

Recommended Daily Fluid Needs for Adults*			
Cups	Fluid Oz	Liters	Gallons
9-12.5	72-100	2-3	0.5-0.75

*National Academies of Sciences, Engineering, and Medicine recommendations for adequate daily water intake (2.7L for Women, 3.7L for Men, 80% from fluid, 20% from food)

All liquids can help improve hydration but sodas, sports drinks, coffees, fruit juices, lemonades, sweet tea, and many other flavored beverages are high in sugar and empty calories. Water is always a great option and sugar free beverages like tea, black coffee, diet soda, or low calorie drink mixes such as Crystal Light can also be used to increase variety.

Infusing water can make drinking water more interesting. Get creative with your water by adding fruits, vegetables, and herbs. Muddling (gently bruising) fresh herbs such as mint, basil, rosemary, or thyme will enhance their flavor. Try different combinations or even add sparkling water for some fizzy fun!

- Cucumber Lemon Cooler: Add sliced lemons and cucumbers in water
- Strawberry Thyme Spritzer: Add sliced strawberries and muddled thyme leaves to sparkling water
- Watermelon Basil Bliss: Add cubed watermelon and muddled basil leaves to water
- Pineapple Blueberry Infusion: Addvcubed pineapples, blueberries, and muddled mint leaves to water
- Raspberry Lime Libation: Add some raspberries and lime slices to sparkling water
- Rosemary Orange Refresher: Add thinly sliced oranges and a sprig of rosemary to water

Like your beverages cold but hate fighting to fit ice cubes through the top of your bottles? Try adding water to the bottom 1/4 of your water bottle and freezing it upright overnight. This will create a custom fit ice cube on the bottom, just add your preferred liquid on top. Try making ice cubes with leftover fruit like pineapples, mango and add them to your drinks on demand. Slice extra grapes in half and freeze for a quick addition anytime.

Workstation Aches and Pains: The importance of movement at your desk

CPT Brooke Sorrell
Physical Therapist
Tripler Army Medical Center

Despite computer work being a very low effort activity, performing highly repetitive tasks for extended periods of time can lead to problems in localized areas of the body if there is not adequate time for rest and recovery. Similarly, maintaining static postures, such as viewing the monitor for a prolonged period of time without taking a break can fatigue the muscles of the neck and shoulder that support the head.

Common locations for workstation injuries seen in the Tripler Physical Therapy Department include neck, low back, elbow and wrist pain. Some tips for prevention of these injuries recommended by the Occupational Safety & Health Administration (OSHA) include:

- Utilize an adjustable workstation, such as a standing desk, so you can easily change your working posture throughout the day to allow different muscle groups to provide support while giving others a break. Visit http://cap.mil/ to request a standing desk.
- Take several, five to 10 minute rest breaks every hour. During these breaks, make it a goal to stand, stretch, and move around. This provides rest and allows the muscles enough time to recover. See the below exercises you can perform at your desk and visit the OSHA website for additional stretches for all body regions.

https://www.ccohs.ca/oshanswers/ergonomics/office/stretching.html

 Alternate tasks whenever possible, mixing non-computer-related tasks into the workday. This encourages body movement and the use of different muscle groups.

These tips are for injury prevention as well as treatment if you are already experiencing pain that is related to your workstation job requirements. Try and implement these tips and stretches into your daily routine for a minimum of four to six weeks. If you do not start to see improvement in your pain, make an appointment with your Primary Care Manager/Provider to come see us at Physical Therapy!



Chin tucks:

- Sit upright in a chair.
- Place two fingers on chin as a guide (do not press too firmly).
- Guide yourself into a "double chin" position. The motion should be directed back and you should stay looking straight ahead.
- 2-3 SEC HOLD; 10 REPS; 1-2 SETS every hour



Scapular squeezes:

- Squeeze shoulder blades down and back
- Hold 2-3 secs, slowly release
- Can be performed in conjunction with chin tucks
- 10 REPS; 2 SETS every hour

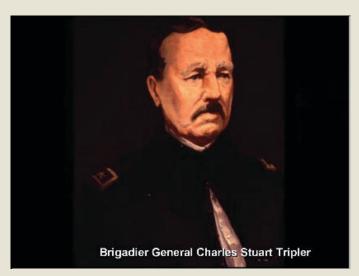
TRIPLER'S NAMESAKE REMEMBERED – 99 YEARS



The origins of TAMC date back to 1907 when several wooden structures at Fort Shafter's Palm Circle were used as a hospital.

On June 26, 1920, a group of frame buildings at Fort Shafter was named "Tripler General Hospital," after the legendary American Civil War Medic, Brigadier General Charles Stuart Tripler (1806-1866), who made significant contributions to the development of military medicine.

Tripler was an Army surgeon who saw multiple conflicts throughout his career and authored the Manual of the Medical Officer of the Army of the United States, which became the bible for medical officers by standardizing physical requirements for Army recruits.







Hospital Gelebrates Birthday on June 26

Tripler U.S. Army Hospital will enter its 38th year of operation after observing its birthday on June 26.

Started at Ft. Shafter in 1920, a group of frame buildings was named Tripler General Hospital. It later became the 218th General Hospital and then, the 147th, during World War II.

The need for expanded operation was noted, and in 1948, the it hospital moved to its present e location and was redesignated Tripler General Hospital.





During World War II, the high number of patients requiring treatment greatly exceeded the hospitals 450-bed capacity, and it was quickly realized that a larger facility would be needed. In 1942, plans for a new hospital were drafted, and the Moanalua Ridge area was selected as the site.

Construction of Wings A through E began in 1944 and were completed in 1948 at a cost of \$41 million. At that time, the hospital had a 563-bed capacity that could be expanded to accommodate 1,100 beds.

It wasn't until 1948, the hospital moved to its present location and was re-designated as "Tripler General Hospital."

In 1985, a major expansion was completed; the new F, G and H wings added 433,000 square feet of space to the hospital. To this day, TAMC is the only medical treatment facility in the U.S. Army to have been awarded a battle streamer. Throughout World War II, Tripler averaged almost 2,000 patients per day requiring treatment for injuries and illnesses sustained in the Solomon Islands, the Marianas, the Philippines and other Pacific battlegrounds.



Tripler Assoc Heights, Oaks, Plantill.







The Honolulu District U.S. Army Corps of Engineers managed the construction of Tripler General Hospital, shown here in Oct. 1947. The construction of Tripler was authorized in June 1944; the ground was broken Aug. 23, 1944; and actual construction began in 1945 after necessary general utility work was completed. Tripler's buildings were constructed of steel-reinforced, rose-colored, stuccoed concrete with the buildings grouped informally to avoid an institution-like environment. Located on a 375-acre site, Tripler's principal buildings were designed and built to prevent structural damage from earthquakes. An additional safety feature was the central building was divided into 12 individual units, each structurally isolated from adjacent units. Another notable fact is that the primary flow of traffic in the hospital in 1948 was vertical rather than horizontal.

CIOO YI MITA CODITION BIRAYUCO MD26,2020

100 Year Anniversary Plan

Proposed ideas for celebrating this monumental event include a 10-month long celebration starting this August to highlight every decade from Tripler's inception in 1920, to where we will be in 2020.

Anticipated events will be relevant to the decade we are celebrating to include many of the same activities that Tripler has conducted over the years such as: celebrity entertainment, sporting events, movies on the lawn and at the Kyser, as well as fireworks, hospital tours, a proclamation signing, and more.