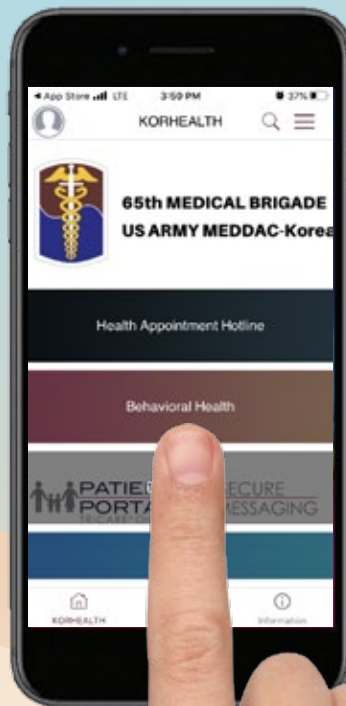


Pulse

MAY 2020

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INSIDE

COVID-19
Children's
Time Capsule



Dr. Gina Sohn - U.S. Dentist
Licensed to practice in Massachusetts,
Conneticut & New Jersey.
Tufts Graduate..., the Smile Artist!

- Graduate of Tufts University, School of Dental Medicine – Boston, Mass.
- Studied at University Paris 5 (Rene Descartes).
- Orthodontics - trained at USDI.
- NYU Trained for Implant Dentistry.
- Fluent in English, Korean, Japanese & French.



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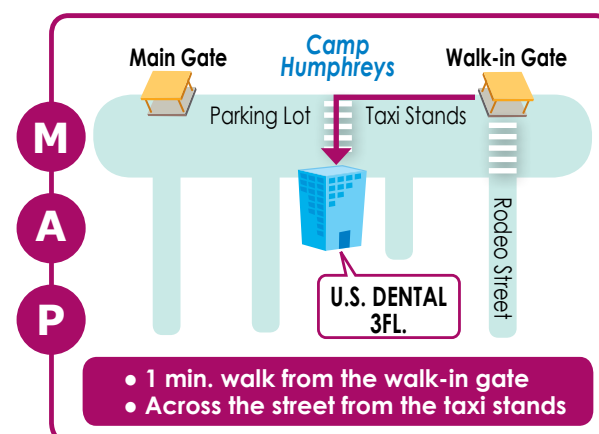
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- Dental Implants
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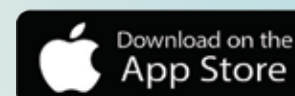
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The 65th Medical Brigade/MEDDAC-K

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KORHEALTH is
 an innovative phone application available
 on Apple and Android. This application is user
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The legacy Brian Allgood Army
 Community Hospital phone application
 will be phased out by May 31.

EDITOR'S LETTER

Significant, collaborative, and tireless efforts are happening throughout the Army and Army Medicine in the fight against COVID-19. As the Republic of Korea and United States Forces Korea slowly begin to re-open. The 'Pacific Medics' team continues to do their part and remain postured to support these efforts and ensure all servicemembers, Civilians and Families are safe during this pandemic. Guidance is pending on how to begin resuming normal training and readiness activities not only on the posts across the peninsula, but around the world as well.



A shoutout to the Defense Logistics Agency (DLA) who have executed more than 4,000 contracts that total more than \$800M in support of DOD and the whole of government COVID-19 requirements. DLA has delivered to our military and federal agencies millions of N95 masks, gloves and hand sanitizer as well as ventilators and more. I want to applaud the United States Army Medical Material Command-Korea and military logistics team whose support has contributed to the success of the local response efforts on peninsula.

Last month we celebrated, April 19-25, along with the 95th Medical Detachment Blood Support lab professionals as a part of the "National Medical Laboratory Professional's Week," commonly just referred to as "Lab Week." Lab Week is an annual celebration of medical laboratory professionals and pathologists who play a vital role in health care, patient advocacy, and research. This week celebrated all the contributions of those who generally work behind the scenes and are sometimes forgotten. As one Laboratory Technician said during the proclamation signing...We're the ones that turn the doctor's educated guesses into actual scientific diagnoses.

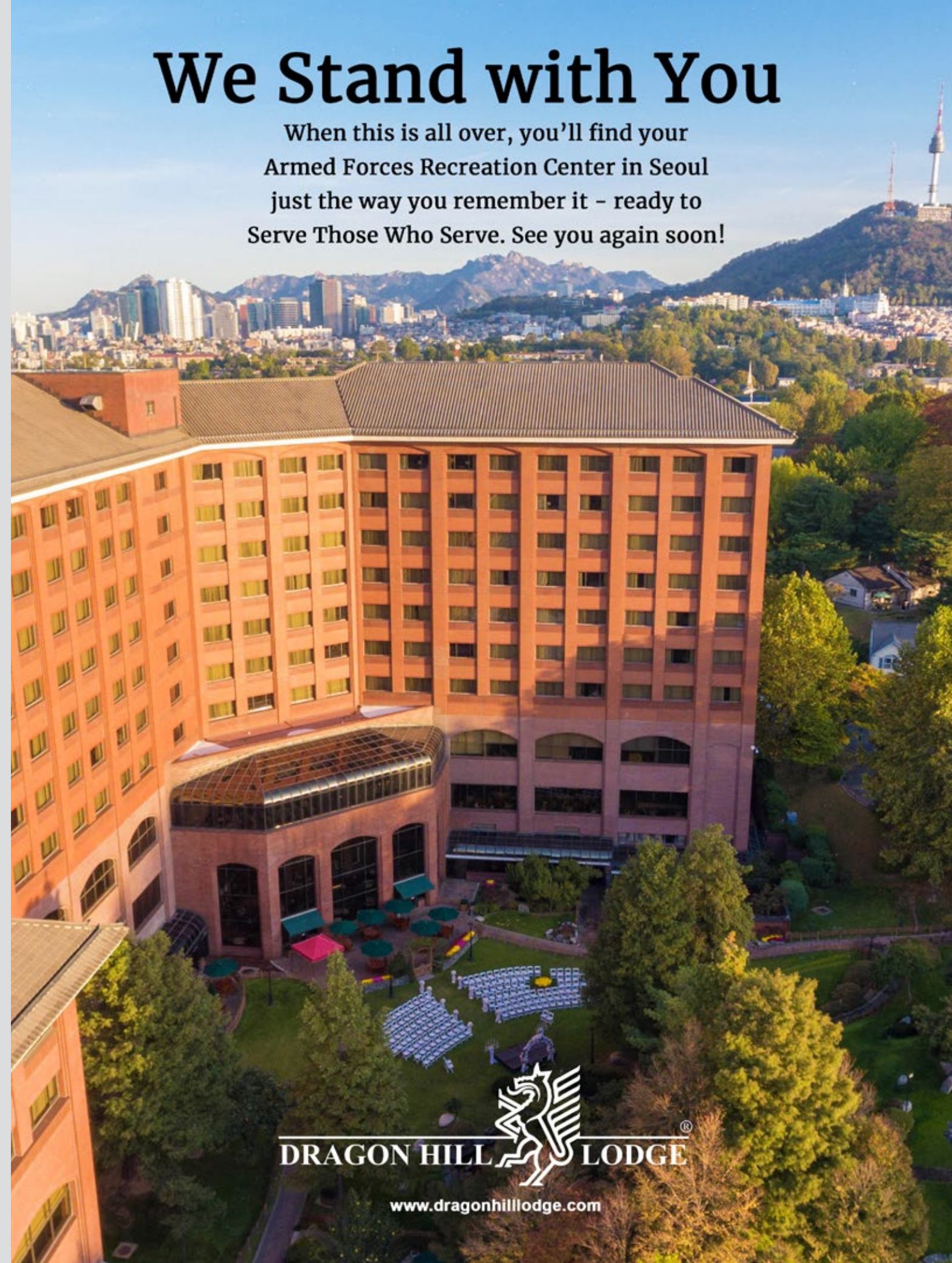
Take time to pause and acknowledge the outstanding work of these Soldiers, Civilians, and Contractors who have enabled us to effectively support our operations on the peninsula during this global crisis. Check out the following video message. Thank you for all you have done and keep up the great work! <https://www.dvidshub.net/video/749396/2020-lab-professionals-week>

Army Medicine is Army Strong!

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

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KORHEALTH

Front Cover

The 65th Medical Brigade/MEDDAC-K presents KORHEALTH, an innovative phone application available on Apple and Android. This application is user friendly and provides an all-inclusive medical, dental, veterinary, and public health information on the Korean Peninsula. The legacy Brian Allgood Army Community Hospital (BAACH) will be phased out May 31.



CHILDREN'S CORNER

In these trying times of home schooling and quarantining, the editorial staff of the PULSE65 this month included an insert "Children's 2020 COVID-19 Time Capsule" with a variety of activities for those with children of a young age.



E-C INTERNATIONAL LAW OFFICE



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- Domestic Violence
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- International Law
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The 135th Forward Resuscitative Surgical Team (FRST) combined efforts with the 95th Medical Detachment (Blood Support) and Bravo Company, 3-2 General Support Aviation Battalion to perform an EDRE back in February. An EDRE, Emergency Deployment Readiness Exercise, is a no-notice, rapid-deployment exercise designed to test a unit's ability to alert, marshal, and deploy forces and equipment to an emergency disaster for contingency operations. The 135th FRST conducted the exercise on a number of movement platforms providing split operations for Eighth U.S. Army with maximum flexibility for contingency operations within the Korean peninsula. See page 16 for more. (Courtesy photo)

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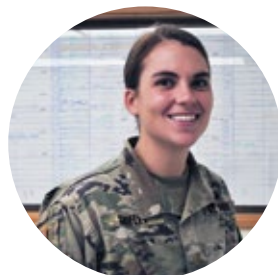
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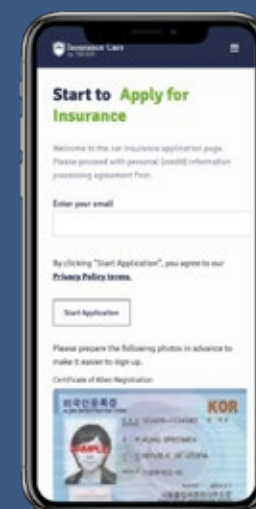
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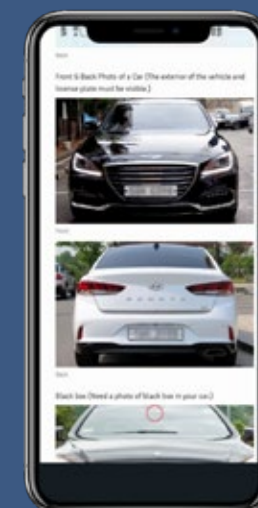
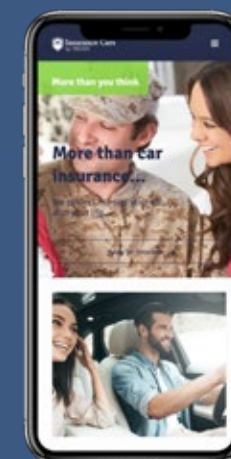
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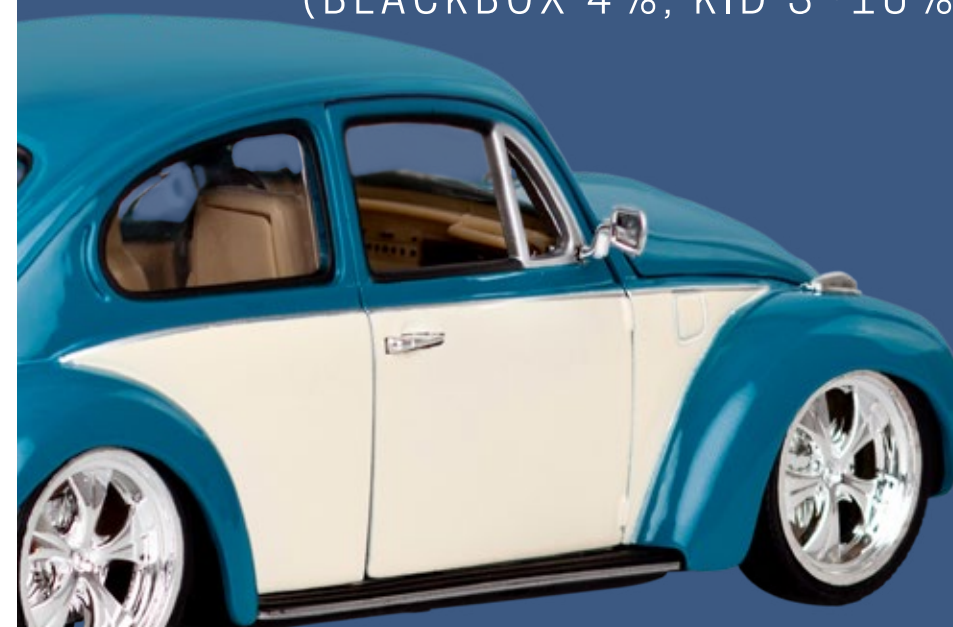
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Surgeon General's Message



**Lt. Gen.
R. Scott Dingle**

U.S. Army Surgeon General

“As various areas of our Nation slowly reopen, I need you to remain vigilant. We're still fighting an invisible enemy. Please continue to follow the CDC's guidelines for protecting yourself and others.”

Our Army remains focused on three priorities, protecting the health of the force, maintaining operational readiness, and supporting the national response to COVID-19. Supporting these priorities necessitates that we balance mission requirements with force health protection. It is vitally important to keep you safe and in the fight, while ensuring our people are trained and ready to defend the nation.

The White House unveiled its guidelines for reopening the Nation. Texas will be among the first states to start the gradual reopening. The leaders in the National Capital Region and other federal agencies are also discussing the best approach to reopening the area.

The DOD extended its stop move or suspension of domestic and international movement of military personnel through June 30. There are exceptions for troop deployments and returns, recruiting and basic training, temporary duty travel or changes of station, exiting the military, and travel for medical treatment.

In order to get ahead of need and remain flexible in our support to the national response, the DOD is shifting to employ medical capabilities by either - embedding personnel in hospitals, extending existing local capacity, or utilizing fully-equipped alternate care facilities. This approach enables our Army to meet emergent demands with speed and efficiency, if called upon.

TRICARE users who have off-base doctor visits and tests related to Coronavirus, now have their copays waived as a provision of the Families First Coronavirus Response Act passed last month.

Finally, thanks for all of the tremendous work you and your teams are doing on behalf of the Nation, our Army and Army Medicine. I am proud of what you have accomplished. As various areas of our Nation slowly reopen, I need you to remain vigilant. We're still fighting an invisible enemy. Please continue to follow the CDC's guidelines for protecting yourself and others. Wearing a mask or face covering protects those around you and their mask or face covering protects you. Remember to wash your hands. Practice social distancing. Stay safe and stay connected. We must continue to operate smartly, as our response to this pandemic evolves.

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Lt. Gen. R. Scott Dingle
U.S. Army Surgeon General

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SCENE & HEARD

NATIONAL & INTERNATIONAL

By Eric Young-Seok Park

3 CHARGED IN KILLING OF STORE SECURITY GUARD OVER VIRUS MASK

A woman, her adult son and husband have been charged in the fatal shooting of a security guard who refused to let her daughter enter a Family Dollar in Michigan because she wasn't wearing a face mask to protect against transmission of the coronavirus. Calvin Munerlyn was shot at the store just north of downtown Flint a short time after telling Sharnel Teague's daughter she had to leave because she lacked a mask, according to Genesee County Prosecutor David Leyton. Teague, 45, argued with Munerlyn, 43, before leaving. Two men later came to the store. Teague, her husband, Larry Teague, 44; and Ramonyea Bishop, 23; are charged with first-degree premeditated murder and gun charges. Larry Teague also is charged with violating Gov. Gretchen Whitmer's executive order mandating that all customers and employees must wear face coverings inside grocery stores, Leyton said. Witnesses identified Bishop as the man who shot Munerlyn in the back of the head, Leyton said. Sharnel Teague has been arrested. Police were looking for her husband and son. No information has been released about the daughter, who has not been charged in the shooting. "It is important that the governor's order be respected and adhered to, and for someone to lose their life over it is beyond comprehension," said Leyton.



PHOTOGRAPHER TAKES 'CLEAREST-EVER' PHOTO OF MOON BY COMBINING PHASES INTO ONE IMAGE



A photographer has captured a mesmerizingly clear photograph of the moon's craters, by combining its phases into one picture. Andrew McCarthy stacked thousands of pictures together over moon phases to show the surface in incredible clarity. He captured his images at the lunar terminator, the line between the light and dark side of the moon, to give them great clarity and contrast. The California-based astrophotographer described the snap, titled All Terminator, as an "impossible scene." McCarthy said: "From two weeks of images of the waxing moon, I took the section of the picture that has the most contrast (right before the lunar terminator where shadows are the longest), aligned and blended them to show the rich texture across the entire surface. "This was exhausting to say the least, namely because the moon doesn't line up day over day, so each image had to be mapped to a 3D sphere and adjusted to make sure each image aligned." The sun is closer to the horizon in the terminator, creating long shadows that give the surface a three-dimensional appearance. These shadows make the moon's surface clearer and features like craters more discernible.

CARE WORKER 'HUMILIATED' AT BEING TURNED AWAY FROM CONVENIENCE STORE FOR WEARING UNIFORM

A care worker was left feeling humiliated after she was turned away from a convenience store — because she was wearing her uniform. Emily Challinor, 20, visited a Premier store on Wolstanton Road, Chesterton, Staffordshire when she was on a break from her shift, but was dismayed when she was told that no carers were allowed inside. The shop insisted they were only trying to keep all their customers safe due to the risk of coronavirus posed by care homes. The shopkeeper suggested any care workers unable to change should instead call the shop to place an order and they would deliver items to the car. Challinor, of Burslem, said: "I was on a five-minute break in my shift which started at 3.30pm and went on until 10pm when it happened. "I pulled into the local Premier to get a drink and some crisps to snack on. "I went to go in and the lady asked me to wait until a customer had exited the shop but then when I tried to go in again, she asked me what uniform I was in, to which I replied 'sorry what?' "She then said 'well are you a carer or the NHS?' I said 'I'm a carer,' and that's when she said I wasn't allowed into the shop, stating 'no carers allowed.' "I watched as they let every other person in, including five different people in work uniforms but apparently if you're in a carers' uniform you aren't allowed in. "I ended up just leaving." Emily clarified that she wasn't trying to hurt the business but wanted to "make people aware and save the embarrassment".



CA SHOPPER WEARS KKK-INSPIRED HOOD AS FACE SHIELD WHEN GROCERY SHOPPING



A California shopper has been criticised for wearing what looked to be a Ku Klux Klan-inspired white hood to a grocery store amid coronavirus face mask recommendations. The man was spotted in Vons supermarket in Santee, a suburban city in San Diego. Images showed the man pushing around a shopping cart and making his food selections while a white hood, mirroring that of what the KKK wears, covered his face. The unidentified man was approached by several grocery clerks to remove his hood while shopping in the store, said a Vons spokesperson. Later, the store manager approached the man at checkout and told him he needed to remove his hood or leave the store. The man paid for his items and then left. "At Vons, fostering an environment of courtesy, dignity, and respect is one of our highest priorities, and we work hard to hold everyone in our stores to these standards, including customers," said spokesperson Melissa Hill. "This was a disturbing incident for our associates and customers, and we are reviewing with our team how to best handle such inappropriate situations in the future."

BIKE-RIDING MONKEY GRABS INDONESIAN TODDLER

A monkey riding a tiny bicycle swiped at and then dragged a toddler along the ground in the Indonesian city of Surabaya, video published. Indonesian news reports described the monkey as involved in a form of "traditional entertainment." People can be seen in the video playing music while the monkey performs. The monkey can be seen cycling down a narrow street before grabbing a toddler off a bench and then dragging him along the ground. Confused adults can be seen nearby. The news site Indozone.id said the boy was traumatized but uninjured, apart from scratches on his face. Jasa Supanji, who took the video, said that the incident happened on the morning on May 2 as people gathered to watch the performance. The child was fine, he added.



WAITITI TO DIRECT NEW 'STAR WARS' FILM

New Zealand filmmaker Taika Waititi will write and direct a new "Star Wars" film, Disney announced. Waititi has shot from indie acclaim to mainstream Hollywood success in recent years, overseeing Marvel superhero smash hit "Thor: Ragnarok" in 2017 before winning a screenplay Oscar for Nazi satire "Jojo Rabbit" in February. He also directed the first season finale of "The Mandalorian," the hit television show set in the blockbuster sci-fi franchise universe. No date was set for the new movie. But the first of three currently scheduled "Star Wars" on Disney's release calendar is penciled in for December 2022. Disney has slowed down the release of its upcoming "Star Wars" films, with its recently concluded trilogy seeing diminishing box office returns and mixed reviews. Waititi will co-write his "Star Wars" film with Krysty Wilson-Cairns, the Oscar-nominated screenwriter for World War I epic "1917."



OXFORD SCIENTIST SAYS IF CORONAVIRUS VACCINE IS EFFECTIVE IT WILL LIKELY BE SEASONAL

Sir John Bell, an immunologist and the Regius Chair of Medicine at the University of Oxford, said we'll probably know pretty soon whether Oxford's highly anticipated coronavirus vaccine works. Bell told NBC's Chuck Todd that researchers will likely "get a signal by June" about the vaccine's efficacy. The Oxford vaccine has made waves because of the rapid and unprecedented pace of its development and the possibility that it could hit the market in a limited capacity during the fall. If it does prove successful — and Bell's tempered opinion is that "prospects are pretty good" — it likely won't be a one-time vaccine. Bell said as far as anyone can tell the coronavirus doesn't mutate quite as easily as the flu, whose vaccine needs to be updated every year to keep up with the changes, but there's a lot that still needs to be learned about potential immunity to the new virus, so chances are seasonal vaccination will be the norm.



NEARLY 400 EMPLOYEES AT A MISSOURI PORK PLANT TESTED POSITIVE FOR COVID-19

Triumph Foods, a pork processing plant in St. Joseph, Missouri, held company-wide coronavirus testing. By May 3, 374 employees had received positive results but none of them showed symptoms of the disease. Triumph Foods employs more than 2,800 workers at the plant in St. Joseph, meaning about 13% tested positive for the virus. "Those with positive tests have been asked to self-isolate at home. They will be paid according to COVID wage continuation policy," said CEO Mark Campbell. Employees who are self-isolating will also be sent care packages of hand sanitizer and masks, Campbell said. Meat processing plants around the U.S. have been hotspots for the novel coronavirus.



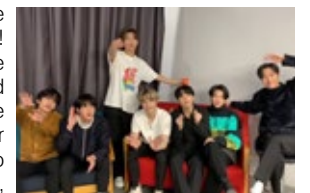
UNSUITABLE FOR 'HUMAN LIFE TO FLOURISH': UP TO 3B WILL LIVE IN EXTREME HEAT BY 2070, STUDY WARNS

If global warming continues unchecked, the heat that's coming later this century in some parts of the world will bring "nearly unlivable" conditions for up to 3 billion people, a study said. The authors predict that by 2070, much of the world's population is likely to live in climate conditions that are "warmer than conditions deemed suitable for human life to flourish." The study warned that unless greenhouse gas emissions are curtailed, average annual temperatures will rise beyond the climate "niche" in which humans have thrived for 6,000 years. That "niche" is equivalent to average yearly temperatures of roughly 52 to 59 Fahrenheit. The researchers found that people, despite all forms of innovations and migrations, have mostly lived in these climate conditions for several thousand years. "We show that in a business-as-usual climate change scenario, the geographical position of this temperature niche is projected to shift more over the coming 50 years than it has moved," the study warned.



BTS WINS FAVORITE MUSIC GROUP AT KIDS' CHOICE AWARDS 2020

BTS made a virtual appearance doing the Kids' Choice Awards! The K-pop group won the Favorite Music Group award at Nickelodeon's Kids' Choice Awards 2020: Celebrate Together and sent in a video message to celebrate. SUGA, Jungkook, Jimin, Jin, J-Hope, RM and V all appeared in a recorded video, where they accepted the prize from Korea. "This is amazing! Thank you so much," RM gushed. The awards show was one of the first major events postponed due to the coronavirus pandemic. However, the network brought together a number of celebs and famous faces to keep the party going. The "Boy With Luv" singers were among the first artists to postpone their concerts. BTS nixed their Map of the Soul Tour in February and have been keeping fans entertained on their Twitter in the meantime.



EDRE a Success

Courtesy of 135th Forward Resuscitative Surgical Team

The 135th Forward Resuscitative Surgical Team (FRST) combined efforts with the 95th Medical Detachment (Blood Support) and Bravo Company, 3-2 General Support Aviation Battalion to perform an EDRE back in February.

An EDRE, Emergency Deployment Readiness Exercise, is a no-notice, rapid-deployment exercise designed to test a unit's ability to alert, marshal, and deploy forces and equipment to an emergency disaster for contingency operations.

The 135th FRST conducted the exercise on a number of movement platforms providing split operations for Eighth U.S. Army with maximum flexibility for contingency operations within the Korean peninsula.

Using rotary wing assets and deploying split teams via a rotary wing CASEVAC, the FRST treated surgical patients prior to evacuation to a higher echelon of care.

The EDRE was noted as being the most effective for the unit, exercising and identifying the processes associated with short notice deployment. By putting plans into effect by deploying appropriate medical equipment sets for split and rotary wing operations, the FRST identified mission critical knowledge and process gaps within patient treatment to effectively incorporate mission critical sister unit support.



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ROKASG, provides 34,000 bottles of water to Eighth Army

Courtesy of Republic of Korea Army Support Group Public Affairs Office

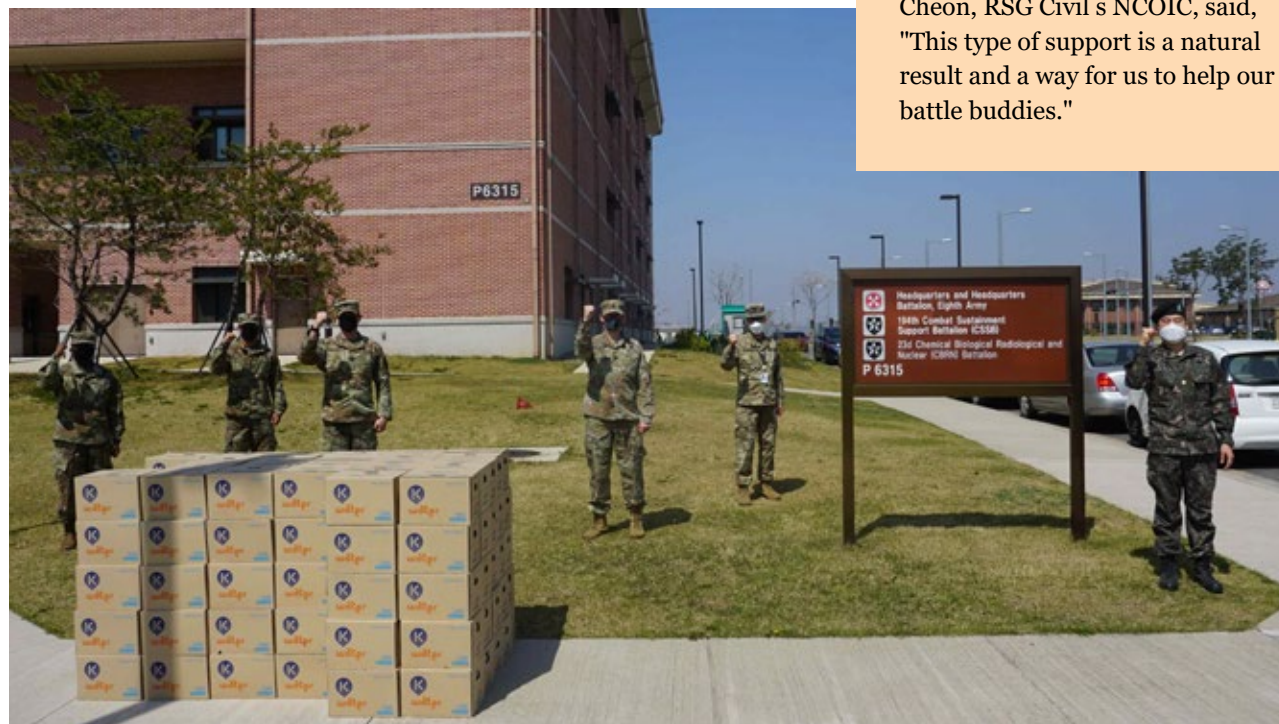


Last month the Republic of Korea Army Support Group supported the Eighth United States Army COVID-19 response efforts by provided over 34,000 bottles of water to U.S. and Korean Augmentees to the U.S. Army Soldiers in quarantine at Camp Humphreys.

The water support was decided upon by ROKA leadership in efforts to overcome COVID-19 with Eighth Army, which operates the quarantine facilities at Humphreys, where numerous COVID-19 positive cases were tested.

The supported water was distributed to six different quarantined barracks.

Master Sgt. Seung-young Cheon, RSG Civil s NCOIC, said, "This type of support is a natural result and a way for us to help our battle buddies."



Non-Commissioned Officers Association Korea

Brandon Schild: NCOA-Korea Treasurer

A Non-Commissioned Officer (NCO) is not only the backbone of the Army but as for the NCO corps in general, it is also a pillar in all branches of service. This is why the Non-Commissioned Officers Association (NCOA) was formulated and supported by all military branches and family members. As it states from the NCOA website, Strength in Unity!

The NCOA was initially created by a group of retired Non-Commissioned Officers and Petty Officers in 1960 in San Antonio, Texas. They wanted to create a fraternal organization that was patriotic as well as benevolent. The NCOA is a federally-chartered, non-profit, Military Service Organization 501(c) (19). From which came forth the basis for the NCOA Mission Statement.

NCOA Mission:

The Non-Commissioned Officers Association (NCOA), a Military Service Organization (MSO), was created in 1960 to address quality of life issues for enlisted members of our Active, Reserve, Retired and Veteran members of all five branches of the military, National Guard cadre as well as their families. As we have evolved, education, work-force development, employment, legislative advocacy and the quality of life within our communities as well as the physical and mental health of our enlisted servicemen and women and their families have become our primary aim (ncoausa.org, 2017).

Here in South Korea, the NCOA Dragon Hill Chapter 1507 was previously located in Yongsan. It was chartered on February 12, 1991, severing those in the immediate Seoul area. Since then, nearly thirty years have passed from its charter until last year, 2019. NCOA Dragon Hill was Korea's main chapter. Now, with Yongsan slowly closing down and people moving to Camp Humphreys as well as the NCOA board members having to conduct a permanent change of station or otherwise known as PCS, it is a time for change and adaptation for a fresh new start. At the end of 2019 and the beginning of 2020, there is a new team, a new name, and a new location, however, the chapter number 1507 remains the same.

As part of this change, the chapter took on the name NCOA-Korea Chapter 1507, which is to represent NCOA all throughout Korea. The chapter is still involved in actives in Seoul to Dongducheon down to Busan. As it grows, so too does its outreach. With the support of volunteers, supporters, and sponsors, it can do its very best to facilitate in as many locations as necessary.

As foreigners in South Korea and as emissaries of America, NCOA-Korea members need to ensure that they build a good bond with the local national neighbors. NCOA Korea is here to better service the local and distant communities and to develop public relationships with its host nation.

You can ask yourself; do I sometimes find myself bored? Have I ever wanted to get out and be part of something different than what I am doing? Or, maybe you may want to socialize in a fraternal setting, or want to volunteer some of your time, like for charity events? Then why not ask one of your local NCOA representatives in about joining or you can even join today by going to our website or scanning in our QR code and ask about what you can do to help support the community, families, Soldiers, and the relationships with local nationals within your immediate areas.

By joining, you are also connecting with people building long-lasting relationships for future friendships and networking. Your dedication and volunteer service can also be applied towards PCS awards, the Military Outstanding Volunteer Service Medal, and even a bullet one your NCOER if applicable.

We are looking for anyone who'd like to join, especially enthusiastic Soldiers and family members that are wanting to be part of a fraternal organization – with your help we can exceed more.





From left, acting Humphreys Command Sergeant Major, Master Sgt. Marc Benjamin; Humphreys Commander, Col. Michael Tremblay; Eighth Army Commanding General, Lt. Gen. Michael Bills; and Eighth Army Command Sgt. Maj. Jason Schmidt; break ground for the installation's newest Army Lodging construction project, April 29. (Photo by Sophia Lee, Humphreys Public Affairs Intern)

Humphreys Breaks Ground for New Army Lodging Facility

Story by Maria Gallegos
Humphreys Public Affairs

Officials gathered April 29 for a groundbreaking ceremony to mark the beginning of Humphreys' second Army Lodging construction project.

Col. Michael Tremblay, the U.S. Army Garrison Humphreys Commander, hosted the event and gave welcoming remarks to a small audience, who were adhering to social distancing and wearing face masks.

Eighth Army Commanding General Lt. Gen. Michael A. Bills and Eighth Army Command Sgt. Maj. Jason Schmidt, were also in attendance.

"Thank you all for attending today's groundbreaking for Army Lodging Wing D," Tremblay said. "Let's take a moment to recognize the Family and Morale, Welfare and Recreation personnel, Department of Public Works, and contracting professionals who had

a hand in getting us this far today – we are on a path to completing construction of this vitally important new wing of Humphreys Army Lodging. Thank you for all your hard work."

When complete, the \$33 million project will have more than 57,000 square feet of new space, with 63 rooms consisting of 37 extended stays and 26 family suites, a fitness center, a pantry, and a breakfast area. The five-story facility will also include parking and a children's playground.

In addition, the new facility will accommodate eligible personnel who are arriving or departing on official travel orders, to include permanent change of station and temporary duty travel.

"This new lodging facility will offer Soldiers, and most importantly, their families, the most desirable location, here on Humphreys,"

Tremblay said. "It will be close to everything, right next to downtown and just as important, right next to the One Stop (in- and out- processing center) in Maude Hall; so as families are entering Korea, making this the assignment of choice, they are really coming here, getting the premiere housing experience as they are introduced to Korea. I'm really looking forward to it."

The convenient location will offer a short walking distance to many services and amenities such as the bowling center, the movie theater, the Commissary and the Exchange.

"I appreciate your attendance today and thank you all for taking time from your busy schedules to observe this important milestone for the future of Humphreys," Tremblay said.

The construction is expected to be completed by 2024.

Keumseong Law Corporation

We, Keumseong Law Corporation, have many years of experience in helping our clients, Koreans and foreigners, who live in the Republic of Korea. Currently, we have more than 20 Korean lawyers, foreign lawyers, a special counsel in immigration and more than 35 supporting staff to serve our Clients. Our Motto is "A trustworthy friend and reliable Partner!"

Keumseong provides free legal counseling regarding disputes on domestic, civic, criminal, immigration, labor and SOFA issues

Our core services we are providing as follows;

☒ Korean Visa:

- Change of status/ extension of visa / working permit (English teacher/ employment of housemaid etc.) (체류비자 연장, 변경/ 취업허가 등)
- Invite family members, friend, business partner from U.S and other countries to Korea. (미국이나 다른 나라에 거주하는 가족, 친척 등 초청)
- Helping discharged soldiers' settlement in Korea (전역군인의 한국정착)

☒ Family Law:

- Divorce and separation (이혼, 별거)
- Child custody/ support (자녀 양육비 지원 등)
- Spousal support/ alimony (배우자 별거/이혼, 위자료 등)
- Estate inheritance under Korean law (유산, 상속 등)

☒ SOFA/ Criminal Cases:

- SOFA consulting (SOFA 관련 상담)
- Police and court trial preparation and representation (형사사건 조사 및 재판)

☒ Other Services:

- Car accident & insurance claim/ DUI defense (차량사고, 보험금문제 등)
- Small claim related to Korea labor law (고용관련 분쟁)
- Tax/accounting claim (세금 등 분쟁)
- Business establishment in Korea (한국에서 회사설립 운영 등)



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Humphreys Stitch Together for Great Cause

Story by Sandra Hill
Humphreys Public Affairs Volunteer

Kelly Schmidt, an active duty spouse, cuts out a template to put together masks during the coronavirus outbreak. Volunteers flocked to the Humphreys Arts and Crafts Center on April. These masks are more important today because the Department of Defense provided guidance requiring anyone on DOD property to wear a mask if six feet of social distance cannot be maintained. (Photo by Pvt. 1st Class Jillian Hix, 20th Public Affairs Detachment)



times of uncertainty, author Margaret Wheatley points out that “there is no power for change greater than a community discovering what it cares about.”

As a community, Humphreys Soldiers, family members and civilians are working tirelessly to prevent and kill the COVID-19 virus, and sewing face masks to protect the force is no exception.

A recent directive from Defense Secretary Mark Esper stated that all individuals on Department of Defense property, installations and facilities will need to wear cloth face coverings “when they cannot maintain 6 feet of social distance in public areas or work centers.”

This new guidance heighten a need for masks, which have been in high demand since the outbreak of the virus, early this year. And, with this new directive,

Eighth Army Deputy Commanding General Maj. Gen. Patrick Donahoe and Humphreys Garrison Commander Col. Mike Tremblay, quickly collaborated and came up with an idea not only to boost the morale of the community, but also to support the necessities of the new order.

After careful consideration, their ideas were discussed with Kelly Schmidt, an Eighth Army spouse, who soon spearheaded a new op-

eration called “Sew-Essential.” She quickly rallied volunteers to help make approximately thirty thousand “masks” for the community.

“I know there is a large network of talented people here at Camp Humphreys,” said Schmidt. “When I put out the call for volunteers, I knew that our community would rise to the challenge and bring the Sew-Essential mask project to life.”

The Humphreys Family and Morale, Welfare and Recreation also stepped in and supported the project by providing the Arts and Crafts Center facility and materials, such as sewing machines, fabric, elastic, and irons to get the project up and running.

Even a local tailor shop, located just outside of the gate, provided their sewing expertise and donated masks to help support the cause.

“Without the support of these agencies, this would not have come together as quickly as it did,”

said Schmidt.

With only a day to plan and execute, the project was operational April 7. The volunteers arrived, some with their own personal sewing machines and tools, while others who had no sewing skills were put to work cutting and ironing fabric. An assembly line was created within hours.

“The goal to get a mask to all members of our community is a worthwhile effort,” said Kelsey Walsh, a 501st Military Intelligence Brigade spouse. “It is nice to be making a difference during such an unpredictable time.”

Army Community Services Volunteer Corps Coordinator Lindsay Hermann, also jumped in to assist with sign-up sheets and copies of the templates required to produce the masks for the volunteers.

“I’m excited to be here to help,” she said. “Volunteers are encouraged to log their hours in the

Volunteer Management Information System portal of the Army OneSource webpage. People here are making a difference to the community and it’s important they get credit for their time.”

Carmen Frank, an Eighth Army spouse, is also grateful for the opportunity to participate to support the community.

“It is great to be a part of something that benefits all the members of our Humphreys community,” she said, as she cut strips of elastic. “Making these masks demonstrates how committed we are in killing the virus. We want all of our community members to stay healthy and now is the time to make that final push to smash it.”

Sew-Essential’s operation hours are from 11 a.m. – 6 p.m., in the Downtown Art and Crafts Center, for volunteers 16 years and older. There are also mask kits available for those who choose to work from home.

NEVER LEAVE A WARRIOR BEHIND.

There is help.
There is hope.
You are not alone.

SHOW YOUR SUPPORT AND PASS IT ON.





WELCOME HOME! ARMY DOC RETURNS FROM INTERNATIONAL SPACE STATION

Story and photos by Ronald Wolf
U.S. Army Medical Command

On April 10, Army physician Col. Andrew Morgan (left) participates in a press conference from the International Space Station. Joining him were Jessica Meir (center) and Chris Cassidy (right). Morgan said, speaking of all the medical personnel on Earth responding to the COVID-19 virus: "As an emergency physician, I understand what it is like to be at the doorway of a field hospital on the front lines of combat and that is exactly the situation that physicians and first responders are finding themselves in across the globe right now. I'm very proud to be part of that profession." (NASA photo)



April 17th, Col. Andrew Morgan — soldier, astronaut, one-time member of the West Point Black Knights parachute team, and Special Forces battalion surgeon — is scheduled to return from the International Space Station. Despite his long list of impressive accomplishments, Morgan describes himself as “a Soldier first,” he has deployed to Iraq, Afghanistan, and Africa.

Morgan is part of the Army Astronaut Detachment, which supports NASA with flight engineers. He has more than 21 years of military service and is the first Army Medical Corps officer to serve as an astronaut. He is an emergency medicine physi-

cian in the Army and also certified in sports medicine. Morgan joined NASA as a member of the 2013 astronaut class and was assigned his specific flight 18 months ago. He has been in space since July 20, 2019. Morgan becomes one of only 239 people from 19 countries who have visited the space station. The ISS has conducted more than 2,800 investigations from researchers in 108 countries.

Morgan is a combat veteran with Airborne and Ranger tabs. He has completed seven spacewalks and the space flight to the ISS. He was flight engineer for Expeditions 60, 61, and 62 during the past nine months.

Morgan and his crewmates facilitated research on projects including mining minerals in the Solar

System, looking into methods for engineering plants to grow better on Earth, and examining cells from Parkinson's patients in zero gravity to better understand neurodegenerative diseases.

On April 10th, Morgan participated in a press conference from the ISS with Chris Cassidy and Jessica Meir. All three are Expedition 62 flight engineers.

During the press conference, Morgan commented on a range of topics from COVID-19 to his home state of Pennsylvania.

Morgan spoke of the sense of pride that he and the other members of the flight crew had in the medical professionals around the world and in the U.S. who are fighting the COVID-19 virus.

“As an emergency physician,” he said, “I understand what it is like to be at the doorway of a field hospital on the front lines of combat and that is exactly the situation the physicians and first responders are finding themselves in across the globe right now. I’m very proud to be part of that profession.”

Morgan also thanked the entire NASA team for all their efforts in supporting the international team on the ISS. “Fifty years ago,” he said, “Apollo 13 had a crisis in space and the mission control team on the ground prevailed through their ingenuity and their professionalism. And now, Jessica [Meir] and I are going to land. I believe our landing date corresponds with the landing date of Apollo 13. Once again the mission control centers are going to bring us home safely.”

Morgan takes great pride in the state he calls home. He said, “My roots go very deep in Western Pennsylvania, in fact several generations. I have taken little pieces of who I am up here on the ISS over the last nine months, and western Pennsylvania came with me. It’s been a real honor to represent that part of Pennsylvania, the Pittsburgh area, here on the ISS.”

The Army and NASA have been working together for more than 60 years. Although there are currently only three active-duty astronauts in the Army, the Army has significant space assets beyond the detachment.

The Army is the military’s largest user of space-enabled systems, especially for communications. Soldiers need satellites in space to help them see the battlefield, shoot the enemy, and move the force, not just communicate.

The Army needs highly qualified and innovative people as it continuously adapts to the changing world. Although traditional roles such as



Army physician Col. Andrew Morgan was one of two members of the NASA astronaut class of 2013 that went into space in July 2019. Morgan is part of the Army Astronaut Detachment; the detachment supports NASA with flight engineers. In late February, Army Recruiting Command partnered with NASA to host the first nationwide oath of enlistment from the International Space Station. Morgan administered the oath on a live broadcast to more than 800 future soldiers at multiple locations across the country and answered questions from participating schools. Morgan told the recruits, “I am a Soldier first — on the ultimate high ground.” (NASA photo)



Army Colonel and astronaut Andrew Morgan was the first Army doctor to travel to space. He has been in space since July 20, 2019, and will return on the anniversary of the landing of Apollo. Morgan was selected to become an astronaut in 2013. (NASA photo)

infantry are important, skills are needed to handle all the technical and specialized jobs that require backgrounds in science, technology, engineering, and math.

In February, Morgan spoke via a live link with students from the Uniformed Services University of the Health Sciences, in Bethesda, Maryland, where he is an alumnus.

“It’s such an honor to be with you” Morgan said. “The Uniformed Services University is a center of excellence for military medicine,

and I’m so proud to be a part of your team.”

Also in late February, Army Recruiting Command partnered with NASA to host the first nationwide oath of enlistment from the International Space Station. Morgan administered the oath on a live broadcast to more than 800 future soldiers at multiple locations across the country and answered questions from participating schools. Morgan told the recruits, “I am a soldier first — on the ultimate high ground.”



Army Veterinarians Post FAQ for Pet Owners to Army Public Health Center COVID-19 website

Story by Douglas Holl
Army Public Health Center

There have been a few stories recently reported in the news about human to animal transmission of SARS-CoV-2, the virus that causes COVID-19. This has raised concerns with some pet owners about how to properly care for and safely interact with their pets during this time of social distancing and stay-at-home quarantines. The Army Public Health Center has updated its COVID-19 website with a number of pet-related COVID-19 frequently asked questions.

In early April, a Malayan tiger at the Bronx Zoo in New York tested positive for SARS-CoV-2. This was the first case of an animal testing positive for COVID-19 in the U.S. and public health officials presume this large cat became mildly sick after being exposed to a zoo employee who was actively shedding virus. Two dogs and one cat in Hong Kong, one cat in Belgium, and more recently, two cats in New York were reported to the World Organization for Animal Health (OIE) after testing positive for the virus that causes COVID-19.

"In all cases, it is believed that the virus was transmitted to the animals after close contact with a COVID-19 positive human and animals showed very mild signs of disease," said Lt. Col. Sara Mullaney, an APHC veterinarian and division chief for Veterinary One

Health, which works with other health professionals on health education, and the prevention and surveillance of animal, zoonotic, and foodborne diseases. "At this time, there is no evidence that companion animals, including pets, can spread COVID-19 to people or that they might be a source of infection in the U.S."

Studies are underway to investigate human to animal transmission in multiple animal species, said Col. Derron A. Alves, deputy director of APHC's Veterinary Services and Public Health Sanitation Directorate. However, most of the studies so far have involved experimental infection of animals with SARS-CoV-2 that don't always reflect natural conditions, so more studies are needed to better understand the infectious behavior of the virus between species under normal settings.

"There are other types of coronaviruses that can make pets sick, like canine and feline coronaviruses," said Alves. "These relatively older viruses have been researched extensively, and we know they cannot infect people and are not related to the coronavirus responsible for the current COVID-19 outbreak. Army Veterinary Services is staying up to date to ensure personnel are fully informed on the latest data."

These recent cases of cats likely contracting the virus from an infected human, though rare, have reinforced

the importance of following the Centers for Disease Control and Prevention recommendations that people who are sick with COVID-19 restrict animal contact, said Mullaney.

"Yes, the bond between people and their pets, particularly in lowering stress, increasing fitness, and bringing happiness is well documented and undeniable," said Mullaney. "We also recognize that for many, the human-pet relationship may be more comforting now especially during the COVID-19 pandemic in which physical distancing has proven helpful in the overall public health disease transmission mitigation strategy. However, in an abundance of precaution, people who are sick with COVID-19 should practice physical distancing of six feet from other people and pets."

In addition, because animals can spread other diseases to humans, it is ALWAYS a good idea to practice healthy habits around pets and other animals, such as washing one's hands before and after feeding or petting and maintaining good hygiene, said Mullaney. These healthy habits are especially important in immunocompromised or ill individuals most susceptible to contracting other diseases.

Mullaney said continuing veterinary medical care for pets, even during this pandemic, is especially important.

"Most states have deemed veterinary practices 'essential business', so limited veterinary services should still be available for your pet," said Mullaney. "Many veterinary practices are implementing social distancing and curbside procedures during this time. It's best to call ahead to see what procedures your veterinary clinic is following to minimize human-to-human transmission, and what veterinary services are being offered."

Owners who are sick with COVID-19 should not take their pet to the veterinary clinic themselves. They should find an alternate caregiver to take the pet in or contact their veterinarian to see what telemedicine options or alternate plans might be available, said Mullaney.

"It's important to try to identify an individual who is willing and able to care for your animals if you contract COVID-19 or have any other health emergency," said Mullaney.

Animal owners should have an emergency kit prepared, with at least two weeks' supply of food and medications, as well as copies of all animals' medical records. Animals should be properly identified with ID tags, microchips, brands, and rabies/license tags as applicable. In the event your animal needs to be transported, the appropriate crates/carriers and/or trailers should be identified and available.

"You should also have a list of people authorized to make medical decisions about your animals, if different from the caregiver," said Mullaney. "Be sure to communicate your instructions for different levels of emergency medical care your animals may need in your absence. If you cannot identify an individual to care for your animals, there may be boarding facilities, local animal shelters or animal control facilities that can provide temporary emergency sheltering. There is no reason at this time to permanently surrender pets to animal shelters out of concern for COVID-19."

Mullaney says social distancing and stay-at-home orders doesn't mean leave out exercise, which is good for human and pet health.

"Keep up your walking routine, but ensure you following physical distancing for your dog, just as you would for yourself," said Mullaney. "It's also best to avoid dog parks and other public places where a large number of dogs and people gather."

For cat owners, the CDC recommends that cats be kept indoors when possible to prevent their interaction with other animals or people. Keeping cats indoors is also good practice regardless of COVID-19 to minimize their risk of injury or exposure to standard feline diseases.

Information regarding COVID-19 is being rapidly produced and disseminated as efforts continue around the world to understand all aspects of this virus and the disease it causes, said Mullaney. All that information can become overwhelming and even misleading at times so it's important to stay tuned to reputable sources such as the CDC, U.S. Department of Agriculture and American Veterinary Medical Association to help navigate topics related to animals and pets. Those organizations bring together experts from across the spectrum to carefully weigh the scientific evidence and how to apply it practically for the continued safety and welfare of animals and people. Installation veterinarians can also be a source of information for pet owners.

Answers to many pet owners COVID-19 frequently asked questions can be found under the heading "pets" at <https://phc.amedd.army.mil/topics/campaigns/covid19/Pages/Frequently-Asked-Questions.aspx>

The Army Public Health Center focuses on promoting healthy people, communities, animals and workplaces through the prevention of disease, injury and disability of Soldiers, military retirees, their families, veterans, Army civilian employees, and animals through population-based monitoring, investigations, and technical consultations.

DOD Starts Tiered COVID-19 Testing Process to Ensure Safety

By Jim Garamone, DOD News

Air Force Gen. John E. Hyten, the vice chairman of the Joint Chiefs of Staff, describes the tiered testing system that the Defense Department is putting in place to combat coronavirus during a news conference at the Pentagon, April 22. (Photo by Air Force Staff Sgt. Jackie Sanders, DOD)



Air Force Gen. John E. Hyten and Deputy Defense Secretary David L. Norquist described the four-tiered system and all other aspects of DOD's support to civilian agencies against coronavirus during a Pentagon news conference today.

The new system means the department is moving from a diagnostic focus to a diagnostic-plus-screening focus, the general said, noting that DOD now has the means to expand testing to a wider military population. The tiered focus gives priority to the highest-risk forces and will ensure strategic mission assurance, he added.

Tier 1 is testing for those involved

in critical national capabilities such as strategic deterrence or nuclear deterrence, Hyten said. Tier 2 will test fielded forces around the world. Tier 3 encompasses forces being forward deployed or those redeploying, and Tier 4 is for all other forces.

Testing will become more frequent as supplies become more available. The military has already started testing those service members in Tier 1, the general said, but he pointed out that testing is not a solution. Service members still must engage in social distancing, wearing masks, washing hands and all other recommendations of medical officials.

The testing is, however, a powerful tool. When used in conjunction

with all other preventive measures, it can "improve our overall force availability," Hyten said.

Norquist and Hyten both said the department is adjusting to the new rhythm COVID-19 has enforced on the world. Military and civilian employees continue their missions under the new strictures, including a huge increase in telework. "We now have an estimated 970,000 active duty and civilian personnel teleworking with great success," Norquist said.

For example, the deputy secretary said, the Defense Finance and Accounting Service has 95 percent of its workforce teleworking. "Each month DFAS makes over 5.8 million payments to civilians, active duty,

reserve, National Guard and DOD retirees, but because they previously prepared for it and practice extensive telework, they're sustaining regular operations at full capacity," he added.

But some jobs in the military can't be phoned in, and that includes training new recruits, working aboard ships and in cockpits and otherwise working in constrained spaces. The department is working to address those situations, Norquist said.

The department will screen individuals with questionnaires and thermometers to identify people at risk. They will be put in quarantine for 14 to 21 days, depending on the risk tolerance, to identify those who are infected, but are not yet showing it, he said.

"Prior to leaving quarantine, we will conduct a swab test and a tem-



Navy Petty Officer 2nd Class James Mckenzie takes a Marine's temperature at Marine Corps Air Station Cherry Point, N.C., March 30, to take precautions against the spread of COVID-19. (Photo by Marine Corps Lance Cpl. Scott Jenkins)

perature check to identify individuals who are infected, but still do not show it. ... As the unit then moves to its mission, [we] will keep the group together, but [with] limited outside interaction to prevent introduction of infection from outside."

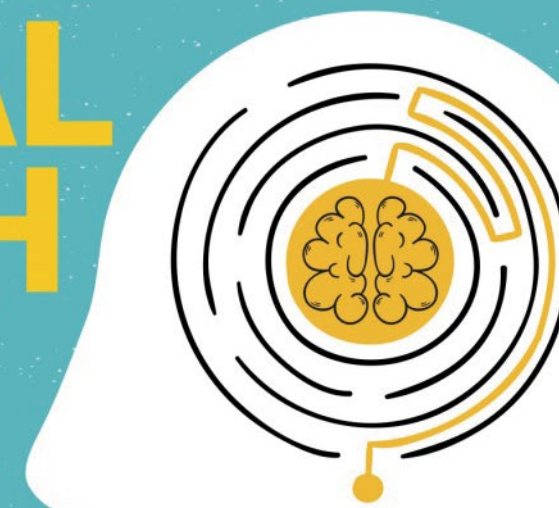
Again, masks, social distancing, cleaning workspaces and more will

continue as the process continues, the deputy secretary emphasized. "These interim measures enable us to reduce the risk," he said. "So we continue to operate until we develop therapeutics and vaccines. And as we learn more about the virus, we will continue to evolve our approach."

Every May is **MENTAL HEALTH** MONTH

An estimated 1 in 5 adults experience a mental health disorder each year. Many of these conditions are treatable, but many suffer in silence because of stigma or shame.

If you know someone in crisis, contact the Military Crisis Line: 800-273-8255 or Website: militaryonesource.mil/health-wellness



Building Psychological Readiness during COVID-19

Story and photo illustration by Christopher Larsen
Regional Health Command - Pacific Public Affairs

Social distancing, working from home, and self-quarantine during the coronavirus pandemic could affect mental health, according to a Regional Health Command-Pacific psychologist.

Lawrence Edwards, RHC-P's director of psychological health, said being physically separated from family, friends and coworkers can also lead to higher instances of emotional distress.

"Many folks will experience an increased level of anxiety during this time, and with a possible increase in isolation, some may experience levels of depression as well," he said.

However, it's possible to build and maintain psychological readiness and resilience, even when stuck at home or in a remote location.

Edwards said it was important to maintain a healthy lifestyle during self-quarantine or working from home.

"Some of the biggest focus should be upon getting enough sleep and exercise," he said. "Get outside, maintain increased levels of social contact, and learn to manage your stress levels."

Edwards said that although there are many different methods and techniques of dealing with stress, they are generally going to be specific to each individual person.

"It can be difficult to focus on any one specific technique that will work for everyone," he said, and

provided some examples of helpful techniques.

"Focus on seeing difficult situations as a challenge, versus a problem," Edwards said. "Be committed to yourself and to your life, your friendships and relationships; and focus on situations over which you have control."

Another RHC-P staffer said family relationships may also be stressed due to the pandemic, since people are together 24 hours a day, seven days a week, with no

definite end in sight.

Lt. Col. David Sensiba, a social worker and chief of RHC-P's family advocacy program, said stressors on significant relationships can make conflict resolution difficult and worsen communications problems.

"When couples clash, the stress of being at home together for an indefinite period can amplify the fault lines that may already exist in the relationship," Sensiba said. "Old disagreements that couples thought they had resolved can suddenly return."

"It is important when emotions begin to escalate that the couples take a step back, take deep

on family and friends, since activities that distract people from current events can be helpful.

"Be kind to yourself and your partner," he said. "Treat yourself with kindness, the same way you would treat a friend. This is a pandemic, so decrease the focus on self-criticism and judgment about what you're not getting done, or how you're not doing as much as you should be doing with your kids' lesson plans."

Sensiba said Soldiers and families, especially those with children, should talk about what's going on during the pandemic.

"Talk to your kids about scary subjects," he said. "Even if kids aren't talking about it, we should broach the topic and create the space for questions to be asked and answered. Kids can be surprisingly aware of what adults are talking and worrying about behind closed doors."

Sensiba said children's feelings of fear and uncertainty can increase when they're not spoken to directly about something that is potentially frightening.

"Ask your children what they have heard about COVID-19, how they are feeling about it, and what concerns they might have," he said. "You can also remind them that you are available to talk about thoughts and feelings and continue to check in with them over time."

"You are certainly not alone," Sensiba added.

RHC-P's large geographic area – covering the West Coast, Alaska, Hawaii, Japan, and Korea – also means Soldiers, civilians and families are dispersed across hundreds of thousands of square miles, which can contribute to a sense of loneliness.

Sgt. 1st Class Andrew Baker, RHC-P's master resiliency trainer,

“

Don't overly focus on only the negative events, as there are also positive events occurring. Look at those positive events, and if you're having a tough day, use them to change your focus or perspective to a more positive one."

— Lawrence Edwards,
RHC-P's director of
psychological health

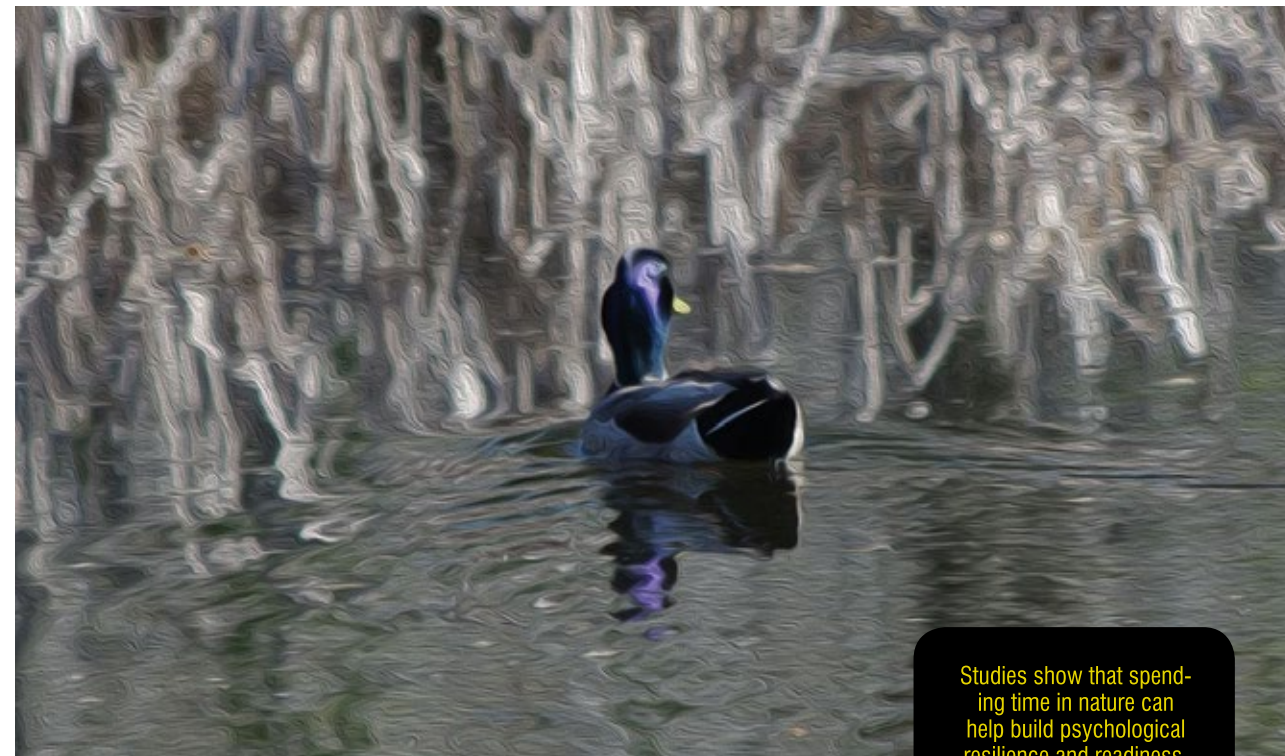
breaths, and it may be beneficial to go another part of the house to regain a sense of calmness before considering reengaging with the other person," Sensiba added.

Sensiba said keeping a positive mood and being resilient are important values and for many people, there's a tendency to avoid negative emotions and to pile negative self-judgment on top of their stress.

Sensiba suggested taking a break from what's going on in the outside world and focusing inward

said people can take advantage of modern technology to help bridge the gap.

“It is important to remember that though we may be physically separated from one another, we are connected through our social network,” Baker said. “Technology is a powerful tool for us to leverage during these times. We can set up message chat groups using mobile applications to remain in contact with our teammates and families. Phone calls and video calls are another way keep in contact.”



The Army’s Resilience Directorate, in Washington, D.C., also offered some tips to building and maintaining psychological readiness:

- **Express gratitude:** Visual cues, like a photo of your favorite person, can help you remember to be grateful for the good things in life.

- **Take your mind off counter-productive thoughts:** Think of something that brings you joy like a favorite song.

- **Practice self-control:** Think before you act. It can help minimize impulsive behaviors and improve decision making, leading to better outcomes.

- **Try deep breathing techniques:** Close your eyes and breathe in and out for six seconds each. Inhale through the nose and exhale through the mouth. Repeat.

- **Smile more:** Smiling can have psychological and physical health benefits such as boosting your mood and lowering your blood pressure.

resources available to help build and maintain resiliency. These resources are there for Soldiers, civilians, retirees, and their families. Many are available 24 hours a day, seven days a week.

Army Resilience Directorate: <https://readyandresilient.army.mil/index.html>

ArmyFit: <https://armyfit.army.mil/>

Army Public Health Center Spiritual Fitness: <https://phc.amedd.army.mil/topics/healthyliving/bh/Pages/SpiritualHealth.aspx>

Studies show that spending time in nature can help build psychological resilience and readiness.

Edwards also recommended maintaining perspective as to what’s going on around you.

“Don’t overly focus on only the negative events, as there are also positive events occurring,” he said. “Look at those positive events, and if you’re having a tough day, use them to change your focus or perspective to a more positive one.”

HELP IS AVAILABLE

The Army has a variety of

Comprehensive Soldier and Family Fitness: <https://readyandresilient.army.mil/CSF2/index.html>

Military Crisis Line (U.S.): (800) 273-8255

Military Crisis Line (Korea): 0808-555-118 or DSN 118

Military OneSource 24/7 Support: 800-342-9647

Psychological Health Center of Excellence: 866-966-1020; 24/7 outreach

USFK Renews Public Health Emergency 주한미군사령부, 공중보건비상사태 연장

Courtesy of USFK Public Affairs Office

The USFK Commander has renewed the current Public Health Emergency for an additional 30 days effective today. It will remain in effect through May 23, unless it is renewed or terminated before then.

주한미군사령관이 현재 시행중인 공중보건비상사태를 오늘부터 30 일추가 연장하여 그 이전에 갱신 또는 종료하지 않는 한 5 월 23 일까지 그 효력을 유지한다.

USFK declared the initial PHE on March 25, and it expired at midnight on April 23.

주한미군사령부는 첫 공중보건비상사태를 3 월 25 일에 선포하였고, 이는 4 월 23 일 자정에 만료되었다.

The decision to renew the PHE does not change USFK’s current health protection condition, preventive mitigation measures being taken, or indicate an increased risk level on USFK installations.

공중보건비상사태 연장 결정으로 주한미군이 현재 시행중인 보건방호태세 및 예방완화조치가 변경되지는 않으며 이는 또한 주한미군 시설내 위험이 증가했음을 의미하는 것은 아니다.

The USFK community has successfully followed control measures put in place to protect the force. This is evident in the less than 1% infection rate among our population of 58,000, however the risk of COVID-19 remains.

주한미군 지역사회는 군을 방호하기 위해 시행된 통제 조치를 성공적으로 지켜왔다.

5 만 8000 명 주한미군 관련 인원 중 1% 미만의 감염률이 이를 뒷받침하지만 코로나바이러스의 위험은 여전히 남아있다.

For additional United States Forces Korea, information visit the USFK website at www.usfk.mil. Despite USFK’s low infection rate, a select few individuals chose to not follow or adhere to the strict control measures. To date, the USFK commander has ordered seven non-uniformed USFK-affiliated individuals barred from all USFK installations for two years for violating existing preventive control measures during the declared PHE.

주한미군내에서 낮은 감염률에도 불구하고, 몇 명의 소수 인원들은 엄격한 통제 조치를 따르지 않거나 준수하지 않았다. 지금까지 주한미군 사령관은 공중보건비상사태가 선포된 이후 예방통제조치를 따르지 않은 7 명의 주한미군 소속 민간인에게 주한미군 시설에 대한 2 년의 출입금지 조치를 내렸다.

USFK will continually assess necessary preventive measures to protect the force. 주한미군은 군을 보호하기 위하여 필요한 예방조치를 계속해서 평가해 나갈것이다.

USFK remains committed to providing a robust combined defense posture while maintaining a “Fight Tonight” readiness to protect the Republic of Korea against any adversary or threat while implementing and maintaining prudent preventive control measures to protect the force.

주한미군은 군을 방호하기 위한 신중한 예방통제조치를 이행하고 유지하면서, 어떠한 적이나 위협으로부터 대한민국을 지키기 위해 "전투"태세를 유지하며 굳건한 연합방위태세를 갖추는데 전념하고 있다.



2nd Lt. Hannah Shiflet, with the 630th Clearance Company, 12th Engineers Brigade, 2nd Infantry Division, Camp Humphreys, Republic of Korea, puts a protective mask on her face as she prepares to interact with occupants of the quarantine barracks, building 371. Shiflet, a native of Kennett Square, Pennsylvania, and a West Point graduate, became an occupant of building 371, where she is the officer-in-charge, after visiting a COVID-19 hotspot, March 27, on Humphreys.



2nd Lt. Hannah Shiflet carries quality control surveys to the occupants of the quarantine barracks, building 371. Shiflet, a native of Kennett Square, Pennsylvania, and a West Point graduate, became an occupant of building 371, where she is the officer-in-charge, after visiting a COVID-19 hotspot, March 27, on Humphreys.



2nd Lt. Hannah Shiflet, poses for a photo at the quarantine barracks, building 371. Shiflet, a native of Kennett Square, Pennsylvania, and a West Point graduate, became an occupant of building 371, where she is the officer-in-charge, after visiting a COVID-19 hotspot, March 27, on Humphreys.

A Shiflet in Roles

Story and photos by Sgt. Broderick Hennington
65th Medical Brigade Special Correspondent

A quick pit stop inside an Exchange Shoppette is rapidly becoming a questionable endeavor for many, yet on March 27, 2nd Lt. Hannah Shiflet went inside despite her second thought. Had she continued ahead to work instead of stopping to purchase pens, she would have been working at the quarantine barracks instead of staying there for a 14-day quarantine.

“A lot of people were at the 24-hour shoppette trying to get supplies. It was the day we went to HPCON C+ (Health Protection Conditions Charlie Plus),” Shiflet said. “It was really crowded, and I remember thinking to myself, ‘gosh, I really hope I don’t end up on CCTV footage’...and I did. It was unfortunate.”

Shiflet, the officer-in-charge of building 371, known as the quarantine barracks with the 630th Clearance Company, 12th Engineers Brigade, 2nd Infantry Division, thought she would spend the day working, until she checked her email.

“I had just gotten on shift and I had an email from a major with the 65th Medical Brigade. She asked

if it was me on page four of the camera footage.” Shiflet continued with a laugh, “undeniably it was me.”

Discovering she was on video at a hotspot wasn’t as difficult for Shiflet as it is for others.

Staff Sgt. Dylan Ledbetter, a combat engineer, with the 630th Clearance Company, is currently serving as a shift noncommissioned officer at building 371, assisted in identifying the pictures.

“When we pulled it up, she turned red,” Ledbetter said. “I was dying laughing. We all knew what was about to go down, but her mind went to how she could get out of this. She just crumbled.”

Everyone knew there was no avoiding quarantine because it’s meant to protect the force.

Pvt. 1st Class Joshua Davis, a combat engineer, with the 630th Clearance Company, is currently working at building 371, understands that nobody is immune to the virus or at least exempt from the protective measures it triggers.

“We’ve had colonels, majors, and every other rank go through this process,” Davis said. “So why not ma’am? It can happen to anyone.”

Still, as Shiflet and everyone else made light of the situation, they all remained professional.

From the moment she saw herself on CCTV, Shiflet understood what steps she needed to take throughout the process and what to expect.

“I knew I had to call the force health protection line,” Shiflet said. “I called my company commander and gave an update, and I followed the protocols from there.”

Shiflet was then escorted to be tested. After several hours, she returned to her office now her new home for the next 14 days.

Upon arrival she was able to see the direct effect of her leadership.

“They treated me like any other occupant. They gave me the brief

that I normally would give,” Shiflet said. “I know they’ve listened to me brief it, and they did it perfectly. They were very professional.”

While quarantined, she noted improvements that she felt could be made to increase efficiency of the process and improve the quality of life for the occupants.

Shiflet said she didn’t enjoy being quarantined, but it was good to see the process from start to finish. It allowed her to see what could be done better.

Although quarantined, Shiflet didn’t relax, nor ignore her duties. She received updates from her NCOs about the status of the barracks and the team’s tasks.

She also utilized the discipline she obtained attending West Point by waking at 7:30 a.m. daily, implementing a rule of not returning to bed after it was made and sticking to a strict workout plan.

“I would start my workout around lunchtime. I’d workout for about two hours, Shiflet said. “I like to run. I’d do a few runs in my room. I ran six miles wall-to-wall, it was

six steps to each wall, and then turned around.”

While discipline and professionalism are vital to the team running building 371, they still found time to help raise her morale.

“One of them put my food in a box and pushed it to me with a broom because I was ‘infected,’ it was all in good fun,” said Shiflet.

During the time she spent in quarantine, Shiflet said she gained a different perspective of those her team assists.

“I used to get annoyed when occupants would ask for new trash bags. Two plates isn’t full,” Shiflet said. “After being in quarantine I realize it’s not just your trash being full. It can also smell. Now I tell people in-processing, at any point if it smells, put it in the hall and we’ll take it.”

Shiflet was released after her 14-day quarantine. She tested negative for COVID-19 and received a warm reception upon returning to her post.

“She was out-processed in the morning and came back to work she changed,” Ledbetter said. “That’s when the jokes started. We were like she’s free! She’s out! She’s not infected! When she came back we were all excited. It was nice.”

Since she’s been released, Shiflet has eagerly rejoined her team and began using her experience to improve the environment at building 371.

“I was definitely happy to get out but more happy to get to work. I could hear my guys working while I was quarantined and felt guilty I wasn’t with them,” Shiflet said. “I think my Soldiers here do a good job of getting occupants what they need. An operation like this takes a while to perfect but we’re making changes everyday to make it better.”



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During pandemic, military community seeks more mental health care than other Americans, survey finds

Story by Christopher Larsen
Regional Health Command - Pacific Public Affairs

Post-9/11 service members, veterans and their families sought mental health care in greater numbers than other Americans did as the coronavirus pandemic took hold, according to a new survey.

Cohen Veterans Network, which operates mental health clinics nationwide, surveyed 2,026 Americans between March 30 and April 1. The results provide a snapshot of Americans' mental health amid the pandemic, as most of the country is under some form of stay-at-home orders.

Of people surveyed, 209 were post-9/11 veterans or servicemembers and 221 were military family members. About half of that group reported that they or a family member sought mental health care during the first weeks of the coronavirus pandemic, compared with 14% of nonmilitary respondents.

Anthony Hassan, president of Cohen Veterans Network and an Iraq War veteran, views the statistic as a positive for the military community.

"While some may say, 'Oh, my gosh, there's a problem there,' I was thrilled to see it, honestly," Hassan said. "I worked my whole career trying to get people to engage in care early — to get help when they need it. They asked for help. That's remarkable."

The pandemic has caused health care systems to make a major push toward virtual medical care. The survey found that the post-9/11 military community was more aware of telehealth resources and was five times more likely than the rest of the population to have used them.

Hassan attributes that to military families' reliance on technology during deployments. "They're not afraid of using telehealth," Hassan said. "They know how to use these online platforms."

Cohen Veterans Network, which treats post-9/11 service members, veterans and their families, saw a 562% increase in telehealth sessions during the past four weeks.

The Department of Veterans Affairs also reported a significant increase in virtual mental health appointments during the pandemic. VA mental health providers held 34,000 video appointments with veterans in March, up 70% from February. About 154,000 appointments were held over the phone in March, up 280% from February. VA Secretary Robert Wilkie said in a statement that the numbers indicate veterans were accessing virtual mental health care successfully and were embracing it.

Regarding telehealth, the pandemic has "changed the culture of mental health care overnight," Hassan said. He hopes the moment leads to more widespread adoption

of telehealth as an everyday resource for American seeking mental health care. However, he also acknowledged its shortcomings.

Family and couples counseling is difficult over telehealth, and privacy is sometimes an issue, he said. Minors have been worried about whether their parents were listening to their sessions. In one recent case, a client went into her closet for an appointment because of the lack of privacy in her home, Hassan said.

"It can't be for everyone," he said. "But the opportunity that came out of this COVID-19 crisis is the emergence and adoption of telehealth."

Telehealth might continue to be important even after states ease their social-distancing guidelines to meet the higher demand for mental-health care, Hassan said. Because of the isolation and the economic strain many Americans are facing, he's expecting a surge in Americans seeking care.

In the survey, seven out of every 10 post-9/11 veterans said they were concerned about their mental health because of the social-distancing guidelines. They were significantly more likely than other Americans to report feeling lonely, isolated or to have trouble sleeping.

Mental health issues could also be exacerbated by financial issues, Hassan said. More than 70% of

all Americans surveyed said they were worried about their basic necessities, such as keeping their jobs and homes. Six out of ten veterans said they were worried about their employment.

"If you look at any challenges in America — 9/11, the 2008 recession, hurricanes — people tend not to come right out to get care, but soon thereafter the system is flooded," Hassan said. "We anticipate seeing a lot of this."

Hassan suggested people try to eat well, to sleep and to exercise, but acknowledged that could be difficult while families are all at home together. He encouraged people to take "time-outs" at home by finding time alone and listening to music, taking a walk around the block or calling someone who's a good listener. Using telehealth or calling the Veterans Crisis Line also are options, he said.

Soon after social-distancing guidelines went into effect, the VA reported an increase in call volume to the crisis line. The department, as well as lawmakers, are monitoring the number of calls and crisis line staffing levels.

Mental health providers and veterans organizations have come up with methods to try to get veterans to connect with each other. Cohen Veterans Network is offering virtual webinars for clients to socialize. AMVETS, the American Legion and the Veterans of Foreign Wars have encouraged its members check in with friends, and Wounded Warrior Project has created a gaming group.

"So many people are left alone and isolated right now, and just to reach out and talk to someone would be a real good thing," Hassan said. "The more we can engage, the more likely we are to save lives, families and futures."

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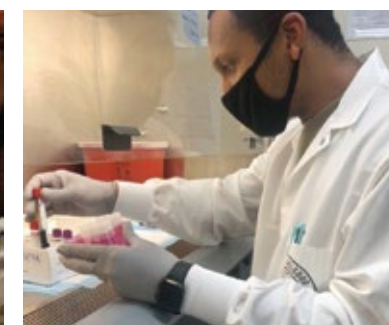
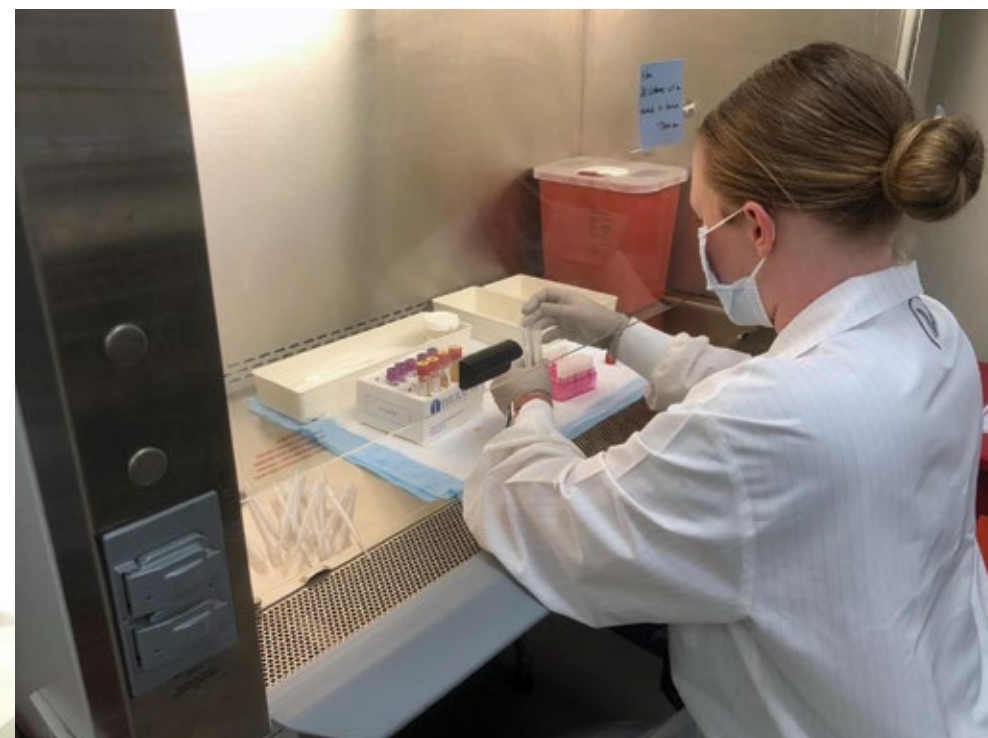
USAMMC-K Continues COVID-19 Response Efforts: *95th Blood Detachment Processes Patient Samples*

Courtesy of U.S. Army Medical Material Command-Korea

In continuing the main efforts of supporting the COVID-19 response effort and operational requirements set by Gen. Robert A. Abrams, Commanding General United States Forces Korea, elements of the U.S. Army Medical Material Command-Korea remain committed to #KILL-THEVIRUS.

Last month, the unit initiated a routine distribution mission to deliver 5,000 specimen collection kits from USAMMC-K to the Brian D. Allgood Army Community Hospital for USN Carriers in the INDOPACOM area of operations, and shipped 10,000 kits to Germany in response to their efforts in USAEUR as part of the aerial resupply operations with the 498th CSSB and 19th ESC.

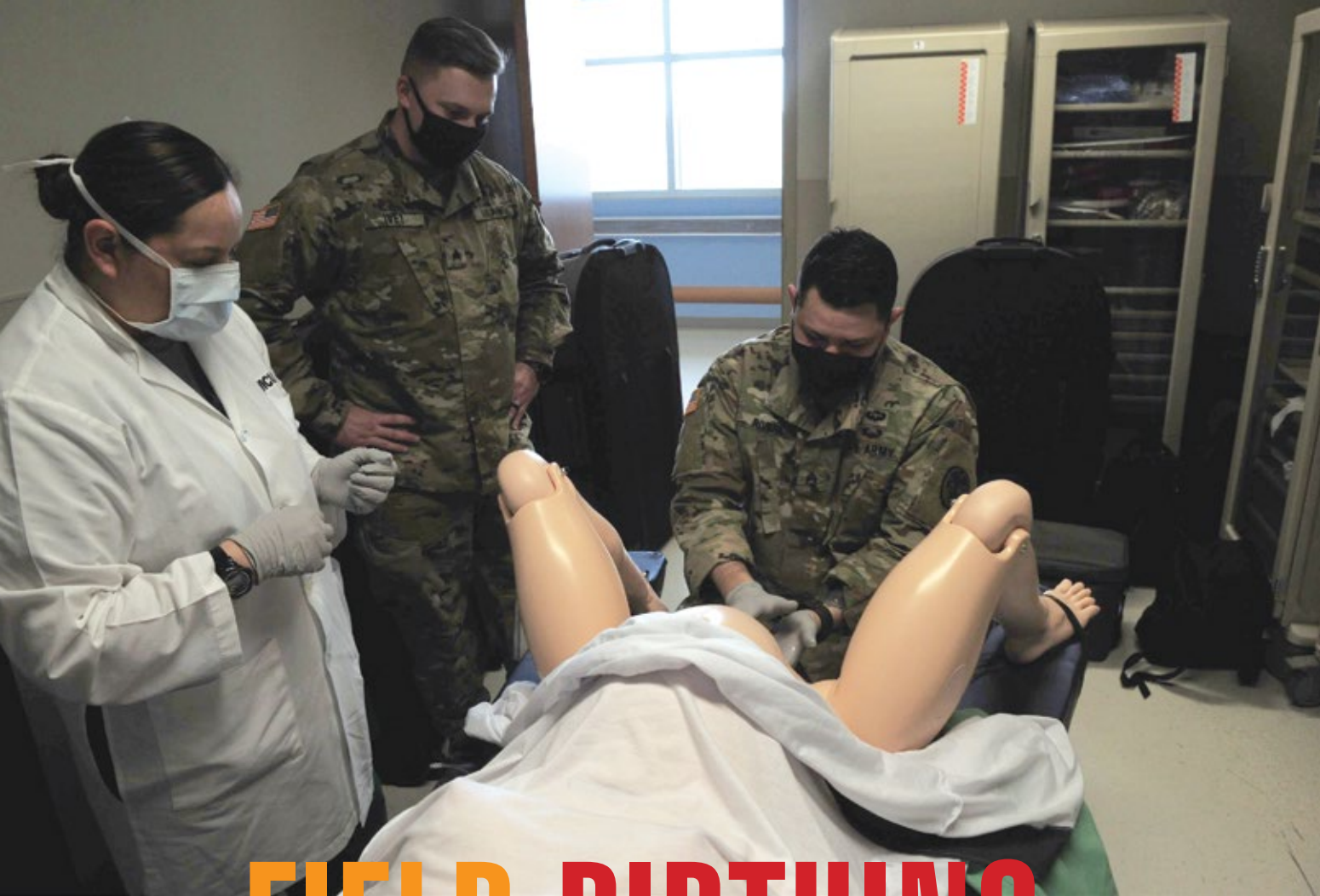
The 95th Medical Detachment (Blood Support) provided support to the 1st Area Medical Laboratory as a part of their antibody testing and collection efforts. The “Blood Knights” in support of COVID-19 efforts provided trained personnel to perform



phlebotomy and process patient samples for testing and shipment and identified COVID-19 antibodies in people who had an exposure to someone who was confirmed positive for COVID-19.

Once the antibodies were identified, they paired the antibody data with a survey to determine if there are any factors that increase the risk of COVID-19 infection and any factors that would lead to a mild course or minimal symptoms. Participating in this project helped the Department of Defense to develop large scale antibody screening and generate information on how to better protect Service members and beneficiaries from COVID-19 infections.

With a “Never Settle” attitude, USAMMC-K continues to maintain the pulse of workforce stressors, while providing steadfast support on the peninsula and aboard. The team remains absolutely disciplined and committed to winning the war on coronavirus.



FIELD BIRTHING

Story and photos by Sgt. Broderick Hennington
65th Medical Brigade Special Correspondent

Typically babies are delivered under the watchful care of a doctor and a team within the confines of a hospital or at a family's home, surrounded by loved ones and a midwife to comfort the expecting mother, who will welcome the newborn into the world-- When that isn't the case, a childbirth can occur almost anywhere, if that occurs, the medical personnel stationed here, are trained to assist with the process.

"If you can't make it to a trauma center or an ER," said Sgt. Clifford Ivey, a combat medic with

the Department of Education and Training at Brian D. Allgood Army Community Hospital (BDAACH). "You have to drop where you are and make sure the mom and baby are safe at all times."

Recently combat medics at the BDAACH conducted field birthing training using the Obstetric SimMom and Newborn SimBaby for the first time.

Field birthing is mostly precautionary training and is not needed often due to the procedures implemented for the health of expecting mothers.

"Generally units limit pregnant Soldiers' work to nothing physically

demanding. In a garrison setting chances of using this are slim to none and in other settings, even less," Ivey said. "A mother knows her timeline for birth. She knows the time between each contraction. She's been informed by her primary care manager and knows what to look for."

Field birthing training isn't new nor is completing the training with a simulation doll, but the Obstetric SimMom is the latest model.

The Obstetric SimMom and Newborn SimBaby arrived to the BDAACH in June of last year, but had logistical issues which prevented implementation into training.

Kelby Shults, a civilian employee, in-charge of environment care at BDAACH, was tasked with ensuring the system was running properly during its initial run.

"We had to get a public Wi-Fi network. Then we had to get the doll and all the necessary electronic devices onto the same network," said Shults. "The challenge with this SimMom is that it was programmed to function on a platform in the United States and with us being in Korea, we had to adapt from a programming standpoint."

The Obstetric SimMom actually simulates childbirth. The baby is stored within the womb and is moved out through simulated contractions and pushing.

The SimMom can also be programmed to create multiple situations and mimic bodily functions which may occur during birthing.

"We use the SimMom to conduct training such as shoulder dystocia, postpartum hemorrhage, and prolapse," said Cpt. Erika Rosales, the Women's Intensive Care Unit OB Nurse officer in-charge of simulation unit at BDAACH. "She can cough, moan, speak and vomit."

The training with the SimMom allows for no less than three, but up to seven personnel to be trained simultaneously, which mimics the potential staffing of a hospital room.

Rosales has delivered a child, and feels performing field training with this device allows the Soldier performing a delivery to be more relaxed.

"I think they will be more comfortable and less panicky," Rosales said. "The difference between the real world and training is you're alone with minimal support. That scares people, but this gives confidence and they will know what to



do. That's the advantage."

Conducting field delivery training with the SimMom is the most realistic training the military can provide.

"This is very realistic as far as the baby being delivered," Ivey said. "With the mannequin being able to breathe and convulse it helps create that extra layer so you can be immersed in the scenario and be invested in what you're doing."



Army's Futuristic Combat Goggles Can Screen Soldiers for Fever

Story by Matthew Cox
Military.com

U.S. Army modernization officials have figured out how to use the service's new experimental combat goggles to scan soldiers for fever during coronavirus screenings.

The Army is in the middle of testing prototypes of the Integrated Visual Augmentation System (IVAS), a sophisticated set of goggles based on Microsoft's HoloLens technology, that are designed to give soldiers a heads-up display. This display can project their weapon sight reticle and other tactical information into their field of view.

Restrictions to limit the spread of COVID-19 prompted the Army to push back the next "soldier touch point" for the system, moving it from summer into fall.

At the same time, it dawned on IVAS program officials that the digital thermal sensors in IVAS could be adapted to detect a fever, according to an Army Futures Command news release.

"A week ago, we were talking about the potential impacts of the pandemic on the IVAS program; today we're talking about the potential impacts of IVAS on the pandemic," Brig. Gen. Dave Hodne, the director of the Army Future Command's Soldier Lethality Cross Functional Team and Infantry Commandant at Fort Benning, Georgia, said in a statement.

Now, soldiers are using the IVAS prototypes to take the temperatures of hundreds of soldiers each



day as they prepare for training at Benning, an installation that hosts thousands of soldiers going through courses such as infantry one-station unit training and Ranger School.

"That's the genius of this system; we can use this technology today to fight the virus, even as we shape it into the combat system our soldiers need tomorrow," Brig. Gen. Tony Potts, who commands Program Executive Office Soldier at Fort Belvoir, Virginia, said in a statement.

Tom Bowman, the director of IVAS Science & Technology Special Project Office with the C5ISR's Night Vision Laboratory at Belvoir, came up with the idea of tweaking the IVAS software to detect a fever.

Bowman and his team of experts trained soldiers from the 1st Battalion, 29th Infantry Regiment to use the goggles to take troops' temperatures. The IVAS prototypes currently being used are not the ruggedized versions soldiers will test this fall, so they can only be used for fever-screening indoors.

Each day, hundreds of soldiers have filed through a processing center where they paused for five seconds so a soldier wearing IVAS goggles could detect their forehead and inner-eye temperatures.

The soldier's temperature registered in the operator's see-through, heads-up display, "a method that proves more economical and sanitary than the use of traditional thermometers," according to the release.

The process takes about 30 minutes to clear roughly 300 soldiers, according to the release, which added that anyone who registered a fever was moved to an onsite medical station for evaluation.

"We've always planned for an agile software system and a digital platform that can be upgraded and adapted to use against emerging threats in the future," Bowman said in the release. "No one anticipated the next threat to emerge would be a virus, but that's the enemy we face today."

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Pvt. 1st Class Micah Lewis, a veterinary technician with the 106th Medical Detachment, 65th Medical Brigade, holds a puppy after its surgery, April 9. Lewis was quarantined after visiting a "hot spot" on Humphreys, tested negative for COVID-19 and was released after 14 days.

Confined within a Bubble

Story and photo by Sgt. Broderick Hennington
65th Medical Brigade Special Correspondent

Making a quick purchase in an Exchange Shoppette is something that many people do without giving it much thought - and that's exactly what Pvt. 1st Class Micah Lewis did on March 19. Little did she know that quick purchase, now forgotten, would land her in a 14-day quarantine.

"I was at the shoppette near Eighth Army (headquarters)," said Lewis. "It was around noon. I was there for maybe 15 minutes. I don't even know what I bought. Then, I went back to work."

Lewis, a veterinary technician with the 106th Medical Detachment, 65th Medical Brigade, wasn't aware

that visit to the shoppette would get her quarantined.

"I was doing a surgical training exercise and began getting really sick. I was throwing up, coughing, sneezing and had a really bad headache," Lewis said. "Then, my first sergeant got a list of hot spots, I was at one of them a few days prior."

Over the last month, amid calls to "protect the bubble" and #KilltheVirus, Humphreys still has seen cases of the coronavirus.

The unpredictable nature of the virus has altered the way Humphreys operates. Soldiers are currently limited to only takeout dining options both on and off the installation and visiting bars and off-post restaurants is restricted in an attempt to quell the

spread of the virus.

The virus pops up unexpectedly and creates "hot spots" like random checkpoints in a video game.

In the midst of all the preventative measures on March 19, a contractor visited the Sentry Village Starbucks, Zoekler Shoppette and many other locations on post. The person then tested positive for COVID-19 on the following Saturday, which made all those places hotspots and caused many to be quarantined.

Lewis was one of many quarantined across Humphreys.

"We have 73 occupants in this building right now," said 1st Lt. Jonathon NG, executive officer for the 630th Clearance Company, 12th

Engineers Brigade, 2nd Infantry Division. "We have 100 rooms."

The coronavirus has spread across the world and has become a global pandemic. Many people were not prepared for it and Lewis wasn't prepared when she was sent into quarantine.

"They didn't give me a packing list. They didn't give me anything. I went to the quarantine barracks with what I had on, the clothes on my back, my phone and my wallet," Lewis said. "The next day I had to call my NCO and have her bring me clothes, a toothbrush, shampoo...things I needed as a person, to be hygienic."

Sgt. 1st Class Alexander Pagel, a combat engineer also with the 630th Clearance Company, is currently serving as the noncommissioned officer in charge at the quarantine barracks.

"There's three different ways 65th Medical screens people," Pagel said. "The first one is going to the emergency room and having the COVID-19 test. Then they are placed into

quarantine until the results come in. The second is calling the hotline and explaining their symptoms. If instructed to go to quarantine, they are then picked up by a drive team and brought to the barracks. The last is being identified by CCTV footage as being at a hot spot."

Lewis admitted her quarantine experience completely surprised her.

"I don't own a laptop, just a TV," Lewis said. "I didn't expect things to be like that. Not empty. I was assuming we'd have more stuff. We didn't even have Wi-Fi in the barracks. It was really boring."

NG acknowledged that it is difficult to be quarantined within the current circumstances, but he emphasized their efforts to help maintain positive morale.

"Maintaining morale is important, but difficult, because it feels like solitary confinement for some," NG said. "Most of the interaction they get is when we bring their food or when there is a package for us to deliver."

Being quarantined can be difficult,

Lewis used her time to partake in less modern forms of entertainment.

"I told my NCO to bring my notebook, books and pens," Lewis said. "For the next two weeks I sat there and drew. I finished reading 'A Midsummer Night's Dream,' 'The Taming of the Shrew' and I started 'A Handmaid's Tale.'"

Although there are alternative, less modern forms of entertainment, the leadership of the barracks is working to improve the current situation.

"In this building we didn't have Wi-Fi," NG said, "A team came and it is now installed."

NG continued to say that the Soldiers have received care packages from many different organizations and unit leadership has dropped off additional comfort items.

After testing negative at the end of her 14-day quarantine, Lewis was released.

Lewis said how glad she was about being out of quarantine and able to go back to work.





Movers at a housing area on Fort Benning, Georgia, load the household goods of an Army family Feb. 24. New guidance states that families and movers must wear face coverings during the COVID-19 outbreak. (Photo by Markeith Horace)

Face Coverings, Health Questions Now Required for Military Moves

Story by Amy Bushatz | Military.com

Military members and families who are packing or receiving their household goods during the COVID-19 pandemic, as well as the movers themselves, are now required to wear face coverings, according to new guidance from U.S. Transportation Command.

"Effective immediately, DoD customers, family members and all individuals supporting any type of shipment pickup and delivery, on and off military installations, will wear cloth face coverings while servicing a customer's residence, as the residence now transitions to a workplace in accordance with CDC guidelines," the April 13 guidance states.

While most military permanent change-of-station (PCS) moves were halted by the Pentagon's global

stop-movement order issued last month, some troops have been given exemptions, while others had shipments already in process.

The stop-movement order is currently slated to end May 11, although it is likely to be extended, Defense Secretary Mark Esper said April 14.

The required cloth face coverings can be homemade or created from "household items or common materials, such as clean T-shirts or other clean clothes," but must extend above the nose, below the chin and cover the mouth and nostrils completely, the guidance states.

Military members and their movers are also instructed to discuss their health before any work is done, it adds.

"Before beginning any work in a residence, DoD customers and [transportation service providers]

must discuss health-related concerns," it states. Suggested questions include:

"Have you (or anyone in your party) had a fever of 100.4 or greater in the last 72 hours?"

"Do you (or anyone in your party) have a cough?"

"Are you (or anyone in your party) experiencing shortness of breath or difficulty breathing?"

"Have you (or anyone in your party) had any exposure to or contact with a positive or suspected COVID-19 person?"

A "yes" response to any of those questions requires the move-in or pack-out be rescheduled, the guidance states.

Military members are also instructed to make sure their families are not at home or to keep them in a single room, away from the movers.

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[HTTPS://WWW.HUMPHREYSUNITEDSPOUSES.COM](https://www.humphreysunitedspouses.com)

The purpose of the spouses club is to provide social and philanthropic needs within Humphreys and the surrounding community.

To promote friendship and goodwill, to provide community grants and educational scholarships while supporting the community Thrift Shop, monthly socials or volunteering at community events.



501st Military Intelligence Brigade UMTs Continue Ministry Despite COVID-19

Story by Kurt Van Slooten
501st Military Intelligence Public Affairs



Capt. Michael Anderson, chaplain, 3rd Military Intelligence Battalion, 501st MI Brigade, and his two children, work to fill care packages for U.S. Army Soldiers and KATUSA (Korean Augmentation To the United States Army) Soldiers in quarantine on Humphreys during the COVID-19 outbreak. (Photo by Krista Anderson)

During this time of uncertainty with COVID-19 in communities around the globe, the Unit Ministry Teams (UMT) in the 501st Military Intelligence Brigade are doing their part to bring a light in the darkness.

“Religious support in this time matters, it’s a source of hope, it’s a source of normality,” said Maj. Karlyn Maschhoff, brigade chaplain for 501st Military Intelligence Brigade.

UMTs, commonly composed of military chaplains and enlisted religious affairs specialists, are tasked with maintaining the spiritual portion of a Soldier’s resiliency and caring for Soldiers, civilians, contractors and families that are within their communities. The UMTs have taken that call and doing what they can to make a difference, especially amongst their isolated and quarantined populations.

Maschhoff explained that when a person is able to continue to connect with the things that give them faith, it provides purpose and allows them to keep going and work through the difficulties.

“We want to enable people to continue to practice their faith, we just have to be creative with how we are going to do it, so that we are protecting the force,” said Maschhoff.

Staff. Sgt. Kendra Brandon, the brigade’s religious affairs specialist, said the teams realized that the families in quarantine also needed support and they have been coordinating commissary trips for families unable to leave their quarters. She also emphasized to the UMTs to engage in self-care and take care of themselves so they will be able to support others.

Before the COVID-19 outbreak, Capt. Michael Anderson, 3rd MI Battalion chaplain, hosted Motor Pool Monday resiliency training with his Soldiers at

the motor pool. He continued the program during the outbreak at the motor pool, increasing the frequency now to two a week, but instead of in-person, he makes aspirational and motivational videos for his Soldiers to watch over the internet to continue to speak to his community. He also conducts virtual bible studies to take the place of in-person meetings.

Unfortunately, during this time, some of the brigade’s Soldiers, KATUSA (Korean Augmentation To the United States Army) Soldiers and contractors, were put into quarantine or isolation pending COVID-19 testing results following possible exposure to infected personnel. The 3rd MI Battalion was hit the hardest in the brigade.

When Anderson’s daughter, Elizabeth, heard about it she said, “Daddy, you should put gift bags at their doors with a note that says, ‘Have Hope!’”

So, that’s what he and his religious affairs specialist did; they put gift bags outside the isolated and quarantined Soldiers doors with a business card with Anderson’s contact information so personnel who received a bag could call him if they felt inclined to talk.

Capt. Oleksandr Ishchuk, 524th MI Battalion chaplain, said he with the assistance of his religious affairs specialist, Pfc. Summer Williams, try to make sure they speak with every member of the battalion on a weekly basis to check on them. Those that are emergency essential they see while at work, but the rest he and Williams call personally.

Ishchuk also said he makes an extra effort to stay connected with the Soldiers and families that are stationed in Daegu, Waegwan, and Busan, away from the headquarters at Humphreys. He has reached out to the Family Readiness Group leader for Bravo Company, in Daegu to better keep a pulse on how things are going there and to see who might need some extra attention.

During a typical week, Ishchuk conducts his bible study, “A Slice with Christ,” where participants eat pizza together and study the Bible. However, now in the time of social distancing, he continues to conduct his Bible studies online and is able to deliver 10 pizzas that were donated by the Agape Humphreys Protestant Service to quarantined Soldiers.

Capt. Justin Wax, chaplain for 532nd MI Battalion, said he has also transitioned to digital gatherings to minister to his community. In addition to providing digital religious and motivational outlets, he commented that he is working with his chain of command to coordinate to meet the physical needs of the Soldiers that are in quarantine. This includes supplying them with

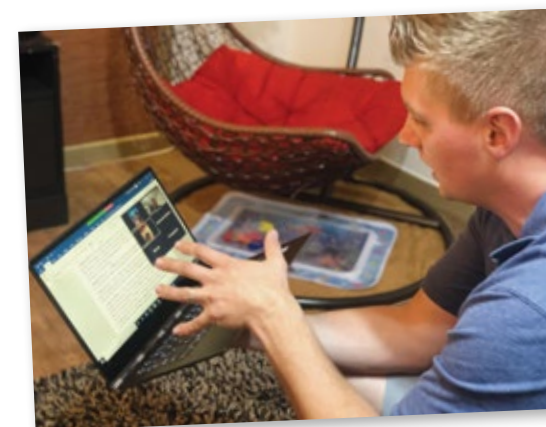
things they may have forgotten to pick up like laundry detergent and other nice to have items like snacks to make those individuals’ lives a little easier.

Pvt. 1st Class Christian Bailey, one of the religious support specialists assisting Wax, said, “We are trying our best to make sure Soldiers have what they need and helping them to feel at ease.”

Wax also said he has done some Facetime counseling with Soldiers in quarantine, as well as limited face to face counseling while maintaining social distancing.

“It’s shifted to using digital means, but at the same time, we’re adapting and overcoming to do what we normally do,” said Wax. “We want the Soldiers to know that the digital doors are always open.”

Wax also mentioned that both the Humphreys community and his local community back in the states have been very supportive to the needs of the quarantined Soldiers. His home church and various other churches, as well as the Daughters of the American Revolution chapter from his hometown, have provided multiple shipments of Girl Scout cookies and other care pack-



Capt. Oleksandr Ishchuk, chaplain for the 524th Military Intelligence Battalion, 501st MI Brigade, continued to offer weekly Bible study sessions virtually with the Soldiers and family members on Humphreys during the COVID-19 outbreak.

ages to brighten the mood for Soldiers.

Maj. Daniel Korie, 719th MI Battalion’s chaplain, said he reaches out to his Soldiers in quarantine, adopting what he called tele-chaplaincy, as well as providing virtual religious support to his congregation that celebrates its services on Saturdays. During this time, he said, you may not be able to pray with your Soldiers, but you can pray for them. He said the chaplains will provide whatever help they can and ask Soldiers to continue to flatten the curve by adhering to the brigade directives for isolation and keeping social distance.

Maschhoff ended with a positive message, saying that after the COVID-19 threat is over, “we have a reunion ahead,” and asked everyone to remember to keep people struggling with the virus, both back in the United States and around the world, in their prayers.



Care from within

Story and photo by Sgt. Broderick Hennington
65th Medical Brigade Special Correspondent

C OVID-19 continues to infect people worldwide and disrupt the lives of millions, but USFK and specifically workers of Brian D. Allgood Army Community Hospital remain at the forefront of preparedness and readiness combating the invisible enemy while protecting the bubble.

Lt. Col. Rick Sonnier, a BDAACH psychiatric nurse practitioner was informed he had recently conducted a session with a patient who was positive for COVID-19.

“I received a call in the middle of the night and was told I had been exposed to a COVID positive patient the day before,” Sonnier said. “I was told to get to the emergency room and undergo the screening process. I was also told I’d undergo a 14-day quarantine.”

Sonnier knew a stay at building 371, the quarantine barracks, was on the horizon, but he still had important work to complete for his patients.

Fortunately for the patients here, Sonnier is experienced and BDAACH is well equipped to accommodate these types of situations.

“I had patients scheduled for the next day so I was given a government phone with hotspot capabilities. My laptop has a webcam and I’d use Facetime and Google Duo. I’d access the pharmacy and lab systems remotely. I continued to see my patients throughout my time in quarantine, basically it was telehealth, which I’ve done for years.”



BDAACH has made patient care a priority. There are also protocols for retrieving prescriptions, even for those confined within the bubble.

“A few of my patients were also in quarantine barracks,” Sonnier said. “Their chain of command would pick up the prescriptions and deliver them here. It’s quick. Once I input the order, it’s ready simultaneously in the lab.”

Sonnier said because of the hospital’s readiness and the personnel at building 371, he was able to transition to the quarantine barracks seamlessly, and still complete his daily work tasks.

“Quarantine was very smoothly run. The staff was phenomenal,” Sonnier said. “So, It didn’t affect me at all as far as what I do for a living. It was easy to keep going. My environment changed drastically, but for me, it was a regular day.”

Coronavirus Disease 2019 (COVID-19): 10 Tips for At-Home Quarantine or Self-Monitoring

If you have been directed to quarantine or self-monitor at home because of possible COVID-19 contact:

1 Stay home from work, school, and away from public places. If you must go out, avoid using public transportation, ridesharing, or taxis.



2 Monitor for symptoms and take your temperature twice daily. If you develop symptoms or a fever, then call your healthcare provider immediately.



3 Get rest, stay hydrated, and exercise if possible. If you are able to exercise, do so in your home or yard. Avoid the gym or other locations where you may come into contact with others.



4 If you have a medical appointment, call the healthcare provider ahead of time and tell them that you have been exposed to COVID-19.



5 For medical emergencies, call 911 and notify the dispatch personnel that you have been exposed to COVID-19.



6 Take everyday actions to prevent the spread of germs.

- Clean your hands often with soap and water for at least 20 seconds or an alcohol-based hand sanitizer that contains at least 60% alcohol.
- Cover your cough/sneeze.
- Avoid touching your eyes, nose, and mouth.
- Wear a cloth face covering when you cannot maintain 6 feet of social distance in public areas or work centers.



7 As much as possible, stay in a specific room and away from other people and pets in your home. Use a separate bathroom, if available.



8 Avoid sharing personal items with other people in your household, like dishes, towels, and bedding.



9 Clean all surfaces that are touched often, like counters, tabletops, and doorknobs. Use household cleaning sprays or wipes according to the label instructions.



10 Make the best of your time at home by teleworking if you’re able or catching up on reading, exercising, or other hobbies.





Taking Care of Each Other, One Mask at a Time

Story and photos by Amber Kurka
Public Health Command - Pacific Public Affairs

Taking care of each other is nothing new for Public Health Activity-San Diego. For these Soldiers, the spirit of teamwork and family are foundational cornerstones in all they do, despite being geographically dispersed throughout California.

Responsible for veterinary services and food safety inspections on military installations, PHA-SD Soldiers have to keep the mission going to keep others safe and healthy during the COVID-19 pandemic. This means that activity Soldiers and Family members need to stay healthy through use of per-

sonal protective equipment.

Recently, the Centers for Disease Control and Prevention published new recommendations on how wearing cloth face coverings, such as masks, can slow the spread of the COVID-19 virus, especially in public settings where other social distancing measures are difficult to maintain.

On April 5, when the Secretary of Defense, Mark Esper, released new guidance on the use of cloth face coverings, Capt. Austin Leedy, officer in charge of Camp Pendleton Branch Veterinary Services, decided to come up with an idea to help all Soldiers and Family mem-

bers throughout the activity.

"I enjoy making things and I know how to sew, so when I heard about this new requirement I knew masks were something I could make," explained Leedy. "I looked online and called my best friend's mom, who works in the health care industry, to troubleshoot a pattern I had seen her use."

Armed with a single sewing machine and donated fabric, Leedy recruited several teammates and her husband to help with the task at hand during the following Sunday afternoon.

"For me, being able to help was important," explained Sgt. 1st Class



Dongseok Ryu, noncommissioned officer in charge of Camp Pendleton Branch Veterinary Services. "This is a deadly situation, so protecting the health of our Soldiers and their Families inspired me to want to work over the weekend to help make masks."

While spread out and practicing social distancing the team worked together cutting and stitching cloth face coverings to help keep others safe.

"At first, there was just five of us and my sewing machine," explained Leedy. "It was really tedious, since it could take up to 25 minutes to make one mask."

Despite the lack of equipment and a few setbacks, the team continued the undertaking. What started off as a simple weekend project quickly grew as several more Soldiers throughout the activity volunteered to help during Easter weekend.

"During the second weekend, we had the activity commander and first sergeant here with three more sewing machines," said Leedy. "That was a huge help and we were really able to ramp up production."

Together the team produced more than 120 masks to distribute to Soldiers and Family members throughout the activity.

"It was great to have our leadership team here working with us," said Ryu. "This is such a stressful situation, so it is important to take care of each other during this time. I think all of our Soldiers really appreciate how much our leadership cares about them."

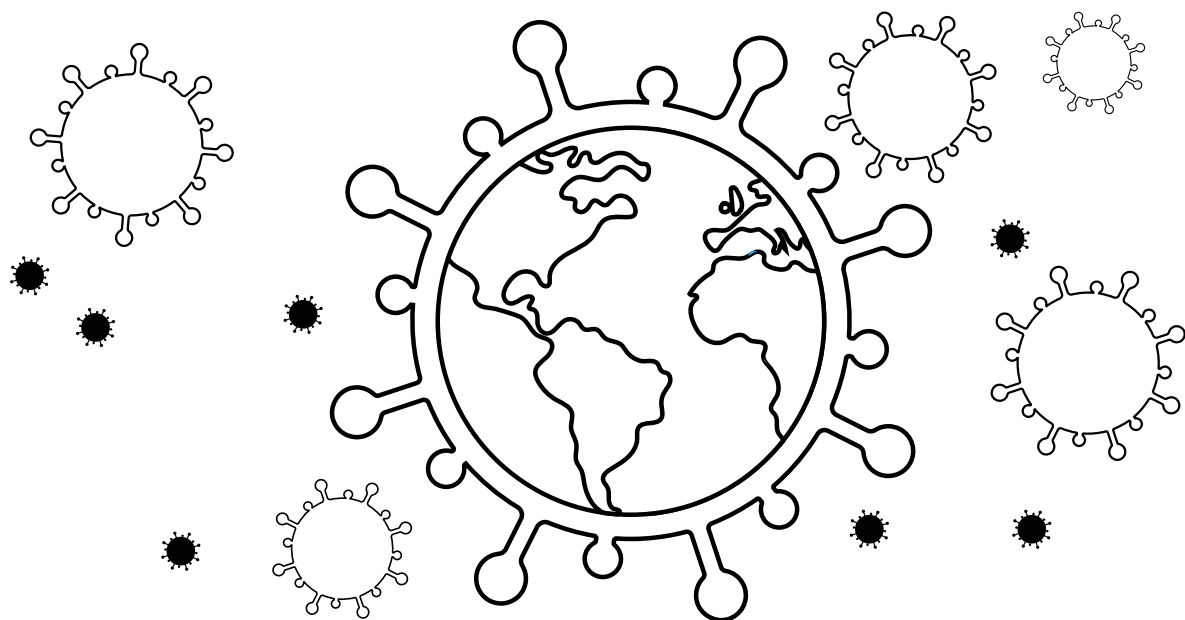
The cloth face coverings served as a temporary solution to help keep PHA-SD Soldiers mission ready and safe.

"The Army is about taking care of each other," explained Leedy. "A lot of people don't have family nearby to take care of them. As an officer, I do the best that I can to be there for my team because we are a family."

For members of PHA-SD, they embodied the Public Health Command-Pacific credo of "100/o!" which is giving 100 percent with zero excuses.



MY 2020 COVID-19 TIME CAPSULE

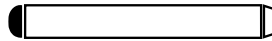


BY: _____

YOU ARE LIVING THROUGH HISTORY RIGHT NOW

TAKE A MOMENT TO FILL IN THESE PAGES FOR YOUR FUTURE SELF TO LOOK BACK ON. AND HERE ARE SOME OTHER IDEAS OF THINGS TO INCLUDE:

- | | |
|--|---|
| <input type="checkbox"/> SOME PHOTOS FROM THIS TIME | <input type="checkbox"/> ANY ART WORK YOU CREATED |
| <input type="checkbox"/> A JOURNAL OF YOUR DAYS | <input type="checkbox"/> FAMILY / PET PICTURES |
| <input type="checkbox"/> LOCAL NEWSPAPER PAGES OR CLIPPING | <input type="checkbox"/> SPECIAL MEMORIES |



DRAW A PICTURE OF THE PEOPLE YOU ARE SOCIAL DISTANCING WITH HERE

♥♥ ALL ABOUT ME ♥♥

I AM

YEARS
OLD

I STAND

INCHES
TALL

I WEIGH

POUNDS

SHOE SIZE

MY FAVORITES _____

TOY: _____

COLOR: _____

ANIMAL: _____

FOOD: _____

SHOW: _____

MOVIE: _____

BOOK: _____

ACTIVITY: _____

PLACE: _____

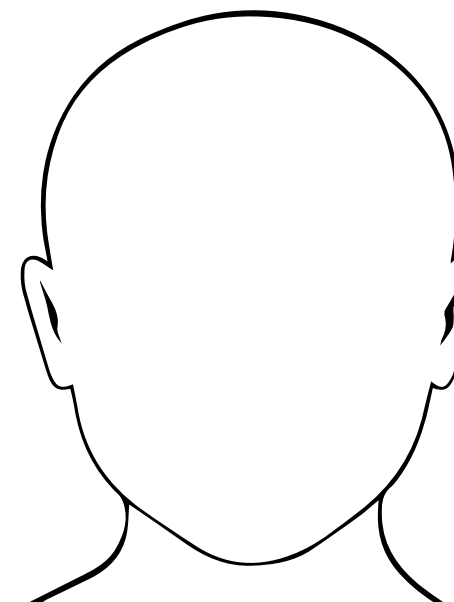
SONG: _____

MY BEST FRIEND/S:

WHEN I GROW UP I WANT TO BE:

DATE: _____

HOW I'M FEELING



HOW MY FACE LOOKS



WORDS TO DESCRIBE HOW I FEEL:

WHAT I HAVE LEARNED MOST
FROM THIS EXPERIENCE:

I AM MOST THANKFUL FOR

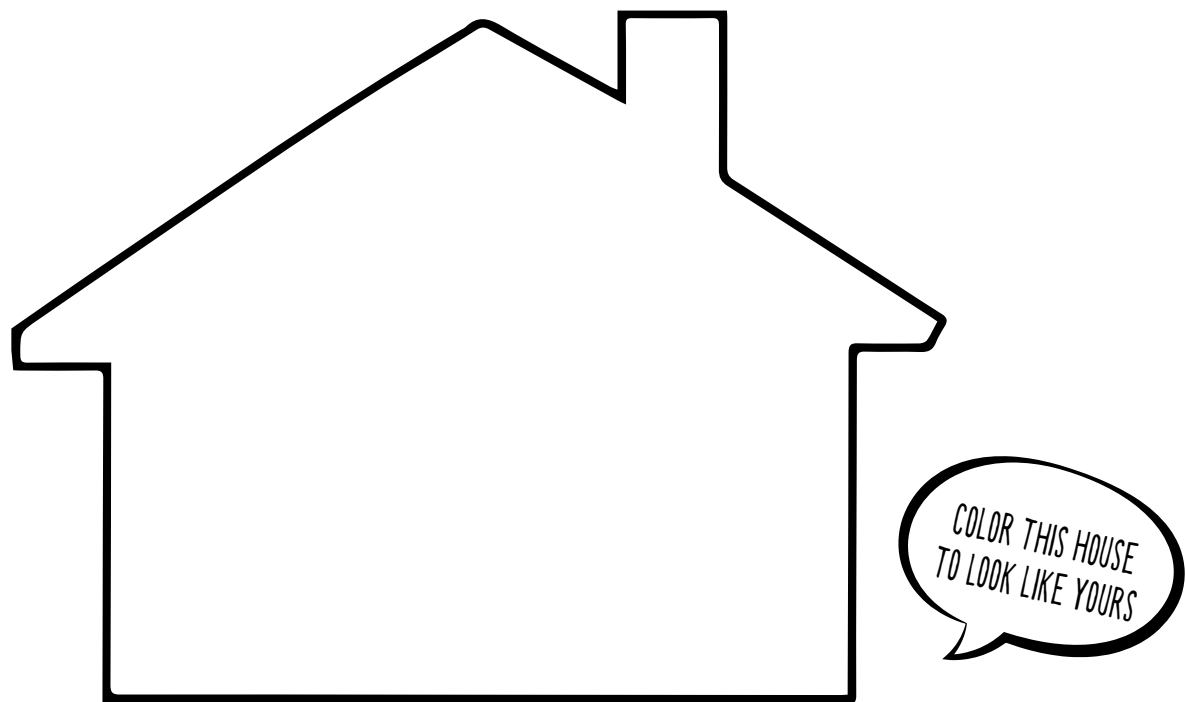
THE 3 THINGS I AM MOST EXCITED TO DO WHEN THIS IS OVER:

1

2

3

MY COMMUNITY



WHERE I AM LIVING DURING THIS TIME:



WHAT THINGS ARE YOU DOING TO HELP FEEL CONNECTED/HAVE FUN OUTSIDE (e.g hearts in windows, chalk notes on sidewalk, etc)

HOW ARE YOU CONNECTING WITH OTHERS?



OUR HANDPRINTS



PRINT THE HANDS OF ALL THE PEOPLE LIVING IN YOUR HOME (IN DIFFERENT COLORS) AND PLACE YOUR HANDS HERE



YOU ARE NOT STUCK AT HOME,
YOU ARE SAFE AT HOME!

WHAT I AM DOING
TO KEEP BUSY:

Multiple USFK Individuals Recovered from COVID-19

Courtesy of USFK Public Affairs Office

Since March 15, including USFK's first confirmed case and its first active duty service member, 17 USFK-related civilians, contractors and dependents have been declared COVID-19 virus-free.

All recovered individuals were cleared from isolation after meeting the following four conditions: remain asymptomatic for at least seven days, remain free of fever without the use of fever-reducing medications, successfully pass two consecutive COVID-19 tests with negative results at least 24 hours apart, and be cleared by a medical provider.

USFK medical professionals have implemented a proven treatment plan for those in isolation to aid in recuperation: rest, remain hydrated, eat healthy and nutritious meals, and exercise.

USFK has kept its number of confirmed cases low - less than a 1% infection rate among its 58,000 strong USFK-related population - due to its aggressive preventive control measures, testing asymptomatic individuals before releasing them from quarantine, directing individuals to go home if feeling sick and seek medical care, encouraging rigorous hand hygiene, maximizing social distancing and use of masks when social distancing cannot be achieved, detailed contact tracing, and thorough cleaning and disinfection of known on-post facilities and areas visited by those confirmed with COVID-19.

The above policies and practices stand as a testament to USFK's aggressive approach to stop the virus' spread as USFK maintains its "Fight Tonight" readiness posture.

USFK remains at a high level of readiness, and continues to maintain a robust combined defense posture to protect the Republic of Korea against any threat or adversary while implementing and maintaining prudent preventive control measures to protect the force.

35,000 Military Retirees Will Soon See a Tricare Prime Refund

Story by Amy Bushatz
Military.com

About 35,000 military retirees will soon receive cash refunds from Tricare, thanks to a policy change made last year that affects how Tricare calculates annual out-of-pocket maximum payments.

The rebates impact retirees with Tricare Prime who paid more than \$2,400 out of pocket towards their annual maximum payment in 2018 and 2019.

They do not impact Tricare for Life or Tricare Retired Reserve users.

The annual maximum out-of-pocket payment, or "catastrophic cap," for any retiree family with a service member who joined the military before Jan. 1, 2018, is set at \$3,000. For those who joined after Jan. 1, 2018, the annual retiree cap is about \$3,600. Those who joined before 2018 pay about \$600 per year for plan enrollment, while those who joined after 2018 will pay about \$1,000.

A set of sweeping Tricare reforms ordered in 2018 directed that the annual fee paid by retirees to use Tricare Prime no longer counted toward the yearly out-of-pocket max. That meant some families were faced with an increase of



about \$600 in their yearly Tricare spending, up to \$3,600 for most retirees.

But that change was reversed last summer, retroactive to 2018, allowing the enrollment payment to count toward the cap once again and reducing the amount of money retirees might pay out of pocket each year by about \$600 for most users.

Retirees should watch their mailboxes for refund notification letters from Tricare's contractors, HealthNet in the west region and Humana in the east, Tricare officials told Military.com today. The letters will start going out April 20, they said. The reimbursements will be automatically to future enrollment fees in the

form of an account credit, officials said. Retirees will also have the option of requesting a cash refund, they said.

The Defense Health Agency, which oversees Tricare, announced a plan early this year to bar retirees from access to many on-base medical facilities, instead requiring them to be seen off base.

That means retirees on Tricare Prime will increasingly be paying out of pocket for care -- and coming closer to hitting that annual out-of-pocket maximum. While retirees using Tricare Prime face no out-of-pocket costs if they are seen by an on-base providers, they do cost shares when seen off-base, including \$20 per primary care visit and \$31 for specialty care.

Coronavirus Disease 2019

COVID-19

What you need to know to keep your family safe and healthy.



Did you know...

TRICARE has a Comprehensive

TELEHEALTH BENEFIT



Worried about coming to an MTF for a routine appointment during COVID-19?

MTFs are addressing most routine needs virtually and will only ask you to come for an in-person appointment if absolutely necessary, while ensuring your protection.



Feeling sick, and need to see a doctor for something other than COVID-19?

MTFs are available to meet all your health care needs. Don't hesitate to contact your MTF to schedule a virtual telephone or video visit with a provider, who will arrange to see you in person if needed.



Do you have a general health care question or concern?

Contact the MHS Nurse Advice Line (NAL) 24/7. If the nurse thinks you need to speak to a provider, the NAL will make sure you get the care you need at the right time.
www.MHSNurseAdviceLine.com





U.S. Air Force Lt. Col. Brendt Feldt, a surgeon at Landstuhl Regional Medical Center's Ear, Nose and Throat Clinic, conducts a virtual health appointment via synchronous video, April 7. Virtual health and telemedicine appointments have increased at military treatment facilities worldwide, including Regional Health Command-Pacific. In some areas, telemedicine now accounts for 80 percent of appointments. (Photo by Marcy Sanchez)

Coronavirus Pandemic Spurs Increase in Telemedicine

Story by Christopher Larsen | Regional Health Command - Pacific Public Affairs

Restrictions put in place to help control spread of the novel coronavirus have resulted in a large increase in telemedicine appointments, according to providers across the region.

"Currently, for RHC-P on-island, all MTFs are using telemedicine in one form or another," said Michelle Huml-VanZile, synchronous program director at Honolulu's Tripler Army Medical Center.

According to the American Academy of Family Physicians, telemedicine is the practice of medicine using technology to deliver care at a distance. A provider in one location uses a video setup to deliver care to a patient at another site, likely their home.

Regional Health Command-Pacific's large geographic area - covering the West Coast, Alaska, Hawaii, Japan, and Korea - means telemedicine's ability to bridge long distance gaps is a real advantage.

"Virtual health is a great modality that is convenient for both the patient and provider," Huml-VanZile said. "It reduces the need for ancillary staff at the provider site. VH can be used both in garrison and for operational use."

Since stay at home orders, school cancellations, and other measures designed to control the spread of COVID-19 began in mid-March, RHC-P military treatment facilities have seen a drastic increase in telemedicine appointments.

Roughly 800 telemedicine appointments have been conducted in recent weeks, Huml-VanZile said; 74 percent of appointments in the Hawaii market were virtual this week.

Another type of virtual medicine delivery, telehealth, differs from telemedicine by providing a broader scope of remote health care services. Telehealth provides mostly remote non-clinical services; telemedicine specifically covers remote clinical services.

"At the lowest level, [telemedicine] is talking on the phone between a healthcare professional and patient," said Col. Christine Kramer, the region's nurse executive. "All MTFs are also doing virtual health, where the provider and patient can see one another."

Conducting virtual medical appointments gives providers a unique opportunity to interact with their patients; right now, remote appointments are often the only way for people to see their provider.

"All RHC-P military treatment facilities are using telemedicine," Kramer said. "All MTFs were using virtual health prior to the coronavirus pandemic, but the Defense Health Agency made more platforms available."

Those additional platforms include Skype and FaceTime, Kramer said, adding to Adobe Connect, Cisco Meeting Server, and Jabber, which were already in use for virtual health appointments. The variety of available digital platforms makes telemedicine even more accessible, the providers said.

Patients may be concerned that the programs or software used to conduct appointments could be difficult to use. But, providers said, the additional platforms approved for use by DHA are widely available and commonly used.

"It may take some individuals some time to get used to the technology on both the patient and provider side," Kramer said, "but they will gain more confidence as they get used to the equipment."

Kramer said patient reaction to the use of telemedicine has been positive.

"Usually the patients end up really liking it," she said. "They enjoy the convenience and not having to travel to their appointment."

Lt. Col. Dolly Toney, a family nurse practitioner and chief of family medicine at the Brig. Gen. Crawford F. Sams Army Health Clinic at Camp Zama, Japan, said most types of appointment can be conducted via telemedicine, including primary and specialty care.

"All family medicine appointments are scheduled as virtual appointments, except for certain obstetrics routine care and well-child appointments requiring immunizations, which require in-person visits," Toney said. "A patient will be seen face-to-face on a case-by-case basis, as decided by the provider's clinical judgment."

Toney said providers use an initial call to screen patients and rule out potential exposure to COVID-19 before having patients come in. Patients with questionable symptoms are received through the back door of the clinic.

Medical procedures that require hands-on treatment aren't suitable for telemedicine, providers said; those patients must still present in person at the treatment facilities.

Providers interviewed said most patients will find telemedicine appointments convenient. Toney said it all starts with a phone call.

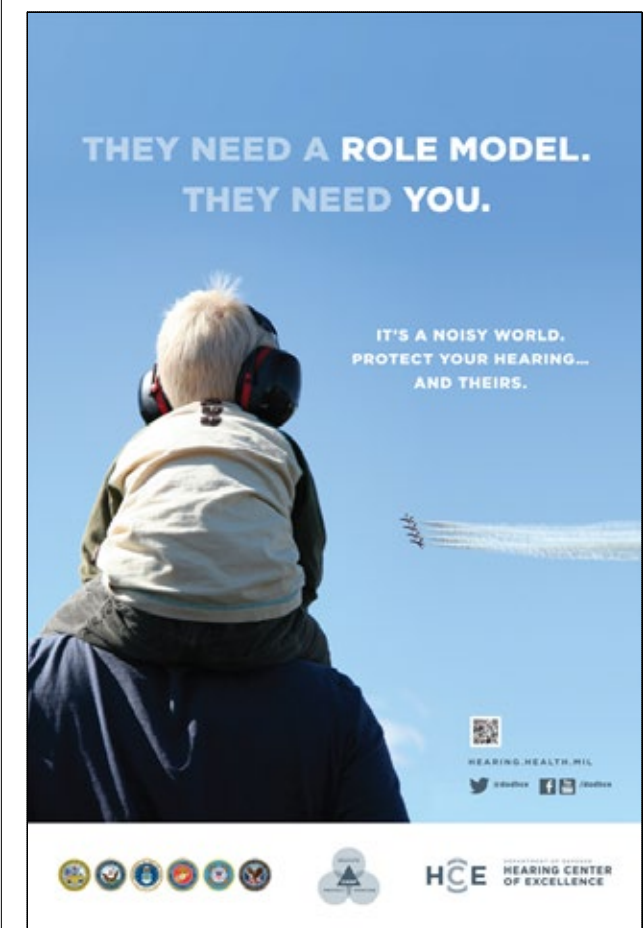
"Patients make telemedicine appointments by calling the appointment line, booking on Tricare Online, or requesting an appointment via secure messaging," Toney said. "Medical readiness refers periodic health assessments to the appointment line for telehealth. Follow-up appointments needing direct provider input are sometimes initiated by the provider."

There are several challenges to telemedicine, providers said, such as slow internet connections or technology issues. Despite the challenges, however, telemedicine and virtual health are seen as positive steps being taken during the pandemic.

In one case, parents with an infant in the neonatal intensive care unit at Tripler were able to videoconference with their new baby and discuss the child's health progress with staff.

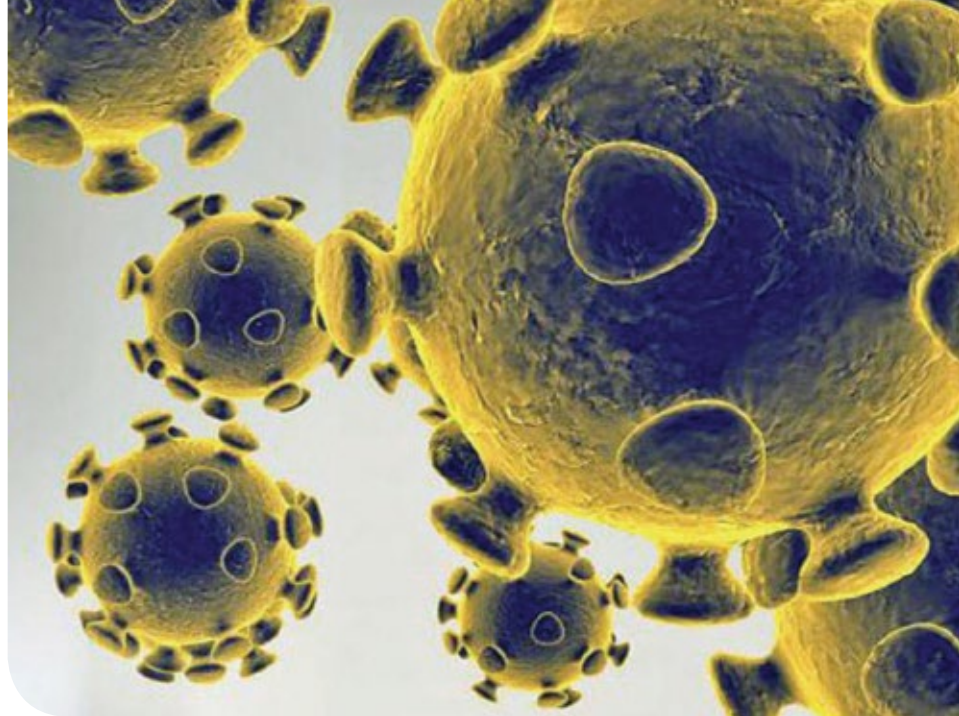
Telemedicine appointments also add another level of convenience, especially for service and family members in remote locations, Huml-VanZile said.

"They take the pressure off families and service members," she said. "They know they can be taken care of."



Army has long history of combating diseases

Story by David Vergun
Defense.gov



A rmy researchers are working to rapidly develop and test experimental vaccines to combat COVID-19, Army Secretary Ryan D. McCarthy said.

The Army is also collaborating with the private sector and other government entities on 24 vaccine candidates, some of which are headed for human testing after having been tested on animals, McCarthy told reporters at a recent Pentagon news conference.

If history is any indicator of future success, there is reason to be hopeful. Being at the forefront of medical breakthroughs is nothing new for Army researchers:

Fighting Malaria

Due to their ability to carry and spread diseases such as malaria, mosquitoes are one of the deadliest insects in the world, killing an average of 725,000 people a year, said. Army Col. (Dr.) Deydre Teyhen, commander of the Walter Reed Army Institute of Research. That surpasses the combined annual



Anopheles merus belongs to the Anopheles gambiae species complex, which consists of at least seven species, and it is a locally important vector in eastern and southern Africa where it is mainly found along the coast. (Courtesy of James Gathany, CDC)

number of deaths from combat (475,000), deadly snakebites (50,000), crocodile attacks (1,000) and shark attacks (10).

To reduce deaths caused by mosquitoes, WRAIR has acted on several fronts, she said: providing proactive medical diplomacy, delivering vaccines and vector control, and leading the world in malaria drug and vaccine development.

Fighting Multidrug-Resistant Infections

An antibiotic drug developed by Army researchers several years ago is now available to treat service members who have life-threatening, multidrug-resistant, or MDR, bacterial infections. Arbekacin is a new antibiotic treatment for MDR infections. Those types of infections may complicate wounds suffered by soldiers in combat, said Army Col. (Dr.) Michael Zapor, an infectious diseases physician at Walter Reed National Military Medical Center in Bethesda, Maryland.

"Of all the bacterial species found on the planet, relatively few are intrinsically multidrug-resistant pathogens," Zapor said. "In Iraq and Afghanistan, the bacterium known as acinetobacter is one such MDR bacterium that has caused problems in our patient population."

Acinetobacter is commonly found in the water and soil of regions such as Iraq and Afghanistan, he said. Although it's intrinsically resistant to many antibiotics, it's not especially virulent and generally not problematic in humans unless their immune system has been severely compromised or the bacterium is inoculated deep into macerated tissue, as would occur with massive

open wounds resulting from battle injuries.

Infections caused by the bacterium were prevalent during the Vietnam War, he said. But at the time, antibiotics were usually successful in eradicating acinetobacter infections. However, over time, resistance emerged and antibiotics became less effective against many pathogenic bacteria, including acinetobacter.

Fighting Yellow Fever

A lot of service members were taken out of the fight in 1898 during the Spanish-American War due to yellow fever.

The Army created the Yellow Fever Commission, led by Army Maj. (Dr.) Walter Reed, which determined that mosquitoes were the carriers of the disease. The commission developed effective control programs to eradicate the mosquitoes.

Fighting Adenovirus

Acute respiratory diseases were fairly common among service members in the early 1950s. Maurice Hilleman, a microbiologist with the Army Medical Center's Department of Respiratory Diseases, discovered that the adenovirus was the culprit.

WRAIR created an adenovirus vaccine in 1956, just three years after its discovery.



▲ Army Col. Dr. Michael Zapor, a staph infectious diseases physician at Walter Reed National Military Medical Center, treats local citizens during his 2010 tour in Afghanistan as a battalion surgeon with the 82nd Airborne Division.

◀ A formal portrait of Army Maj. (Dr.) Walter Reed. Location and date are unknown.



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Initiative opens medical records from tens of thousands of outside clinics to DOD, VA physicians

Story by Leo Shane III
militarytimes.com



Airman 1st Class Maiesha Buford of the 72nd Aerospace Medicine Squadron gives Capt. Theresa Hall her medical file at Tinker Air Force Base in Oklahoma in October 2017. (Photo by Kelly White, Air Force)

At a time when patient's complete medical history could play a key role in their survival, Defense Department and Veterans Affairs leaders announced a new technology breakthrough in their health care infrastructure allowing quicker sharing of appointments and medical notes among their departments and private-sector clinics.

Federal officials on Monday

unveiled a new joint medical information exchange system for the two departments, giving VA and DOD physicians access to a pool of more than 54,000 outside hospitals, health clinics, pharmacies and laboratories.

The work is part of ongoing efforts by the military and VA bureaucracies to modernize their electronic health systems into a single, shared record that can follow individuals through their service careers and into their civil-

ian lives.

Completion of this phase of the work comes amid the worldwide coronavirus pandemic, which has already sickened more than 10,000 patients in VA care and Defense Department personnel.

"Now, if someone has testing for COVID-19 in VA this week but then presents new symptoms at a private facility next week, both providers will be able to see all that information in real time," said Dr. Neil Evans, the interim

director of the Federal Electronic Health Record Modernization program office.

"They can see their past surgical history or other medical issues. And having more health care data allows providers to make better health care decisions."

Both the Defense Department and VA have already been sharing some of that medical information with outside providers in the past, through separate agreements. The new arrangement opens the two separate pools to both federal departments, and should allow for easier partnerships in the future.

Patients and physicians won't see any changes in their files, since the new agreement doesn't require any new software installations or

additional training.

But Evans said having the additional past medical information available should make for better appointments and diagnoses, especially at a time when patients' spouses or caregivers may have limited access to doctors during counseling sessions.

VA officials announced last month they would put health records modernization efforts on hold during the coronavirus outbreak response. Defense officials shut down some work as well, but most of that involves training and site visits.

Work on the health information exchange system, however, was mostly technical and not disrupted by the pandemic response.

Travis Dalton, president of Cerner Government Services — which is working with both departments on their health record upgrades — said that the latest announcement is "a monumental step forward" for the work.

"(It is) enabling a seamless, secure exchange of health data between the departments and an extended network of community partners," he said. "Clinicians will have the right data at the right time to make more informed medical decisions, enabling better health outcomes for our veterans, service members and their families."

In accordance with federal medical information rules, patients can opt out of the information sharing.



Defense Health Agency to Beneficiaries: Stop Taking Zantac

Story by Patricia Kime
Military.com

Defense Health Agency officials recently advised military beneficiaries who take Zantac, also known as ranitidine, for heartburn, ulcers or gastroesophageal reflux disease, to speak with their doctors to switch prescriptions. Those using an over-the-counter version should stop taking it.

The announcement follows an order from the Food and Drug Administration to manufacturers April 1 to withdraw all prescription and over-the-counter ranitidine products amid concerns that an ingredient has been linked to cancer.

According to the FDA, an impurity in Zantac called N-nitrosodimethylamine, or NDMA, "increases over time, and when stored at higher than room temperatures may result in consumer exposure to unacceptable levels of this impurity."

NDMA, a chemical found in industrial and natural processes, is an environmental pollutant that is classified as a probable carcinogen by the Environmental Protection Agency.

Last September, several drug companies, including Novartis and Apotex, manufacturers of generic ranitidine, announced a voluntary recall of their products sold in the U.S., and drugstore chains CVS and Walgreens decided to pull Zantac and generic versions from their shelves.

Sanofi, makers of Zantac, issued a recall of its product three weeks later.

In the April 1 announcement, FDA officials said they did not observe unacceptable levels of NDMA in the



samples of ranitidine they tested.

"However, since we don't know how or for how long the product might have been stored, we decided that it should not be available to consumers and patients unless its quality can be assured," said Dr. Janet Woodcock, director of the FDA's Center for Drug Evaluation and Research.

DHA officials said patients should follow FDA advice, speaking with doctors before stopping prescription versions of the medication and disposing of all versions of the drug. The DHA manages Tricare.

"The FDA is advising consumers taking OTC ranitidine to stop taking any tablets or liquid they currently have, dispose of them properly and not buy more; for those who wish to continue treating their condition, they should consider using other approved over-the-counter products," they wrote.

The Defense Department participates in a drug take-back program;

however, the DoD recommended that consumers follow FDA guidance to dispose of unused medications rather than risk going to a take-back location during the COVID-19 pandemic.

To throw away medications, the FDA recommends:

- Mixing uncrushed pills or liquids with an unappealing substance, such as dirt, cat litter or used coffee grounds.
- Placing the mixture in a container, such as a sealable plastic bag.
- Throwing the container away in the trash.
- Removing all personal information on the prescription labels of empty medication bottles or packaging and recycling.

The FDA also asks patients to report any adverse reactions they experienced while taking the medication, by speaking to their health providers or reporting through the FDA's MedWatch Adverse Event Reporting program.

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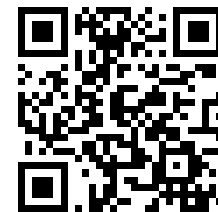


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You will need to bring:

- **A valid photo ID** with Exchange privileges (ID should match the customer name on the order).
- **A copy of the email** you received stating the order was ready for pickup.
- **If you are unable to print the email**, please copy down **your order number** to give to the associate. You will be required to sign for your order when you pick it up.



EXCHANGE

Facilities Directory

HEALTH CARE/TMC

AREA I

Camp Casey Health Clinic
M,T,W,F 0800-1700
Thurs 1300-1630

Camp Casey Front Desk: 737-2762/2763
CRC TMC Front Desk: 732-7776/6011
APPOINTMENT LINE: 737-2273
(Mon-Fri 0700-1600)

Public Health Nurse:
737-3557
Mon-Fri 0830-1730

Audiology: 737-3590
Mon-Fri 0830-1130 & 1300-1630

Behavioral Health (Bldg. 802):
730-4304
Mon-Fri 0830-1730

Immunizations: 737-3577
Mon-Fri 0830 -1200 & 1300-1700

Lab: 737-3580
Mon-Fri 0830-1700

Optometry: 737-3594
Mon-Fri 0900-1200 & 1300-1700

PHAs: Call Appointment Line
737-2273
*APPTs ONLY
*MUST COMPLETE PART 1 FIRST
Pharmacy: 737-3598
Mon-Fri 0830-1700

Physical Therapy: 737-3588
Mon-Fri 0800-1200 & 1300-1700

Radiology: 737-3585
Mon-Fri 0800-1130 & 1230-1700

Triage & Transport Center (TTC): 737-3582
Open 24/7

AREA II

K-16 Medical Clinic
741-6300
Mon – Wed, Fri 0900 - 1530 (closed 1130 - 1300)
(Soldiers only)

AREA III

Sgt. Shin Woo Kim Soldier Center Medical Home
(Bldg. 6370): 737-2273
Mon – Wed, Fri 0830 - 1700; Thurs 1300 - 1700
(Soldiers only)

Master Sgt. Henry L. Jenkins Soldier Centered Medical Home
(Bldg. 555): 737-2273
Mon – Fri 0810 - 2100; Sat, Sun, Holiday 0830 - 1900
(closed 1200-1300)
(Soldiers Only)

Suwon Aid Station
788-5107
(Soldiers only)

AREA IV

Camp Carroll Clinic
737-4300
Mon – Wed, Fri 0900-1700 (closed 1200-1300)
(Soldiers only)

Camp Walker (Wood Clinic)
737-2273 (Press 2-5-1)
Mon – Wed, Fri 0900-1700 (closed 1200-1300)
(Soldiers/family members/retirees/DOD Employees)

AREA V

Osan Air Base
0505-784-DOCS (3627)

BHC Chinhae
762-5415
on – Fri 0830-1630

DENTAL CLINIC

AREA I

Camp Casey DC
(Bldg. 808)
737-9011 / 737-9012
Mon – Fri 0730 - 1630
In/Out Processing (Mon - Fri): 0730 - 1600
(Lunch 1130-1230)

AREA III

Sgt. Shin Woo Kim Dental Clinic
(Bldg. 6370)
737-5129 / 5130
Mon – Wed, Fri 0830 - 1700; Thurs 1300 - 1700

Carius Dental Treatment Facility
(Bldg. 3020)
737-9206/9207
Mon – Fri 0730 - 1630

AREA IV

Bodine Dental Clinic
(Bldg. 220)
737-9452 / 737-4791
Mon – Fri 0730 - 1630
Dental Exams: Activity Duty: Mon – Wed & Fri (Walk in only)
0900 - 1100, Thurs 1300 - 1500
*LIMITATIONS DUE TO SERGEANTS TRAINING
Activity Duty Family appointment only:
(Call 1230 - 1530 Mon – Fri) Space Available appointments

Camp Carroll Dental Clinic
(Bldg. 180)
737-4201/4202
Mon – Fri 0930 - 1630
Call to make appointments for all dental treatment

AREA V

Osan Air Base Dental Clinic
(Bldg. 777)
784-2108
Mon – Wed Fri 0700 - 1700 / Thurs 0900 - 1700

VET CLINIC

AREA III

USAG Humphreys
(Bldg. 2260)
737-9720

AREA IV

USAG Walker
(Bldg. 341)
737-9831

AREA V

Osan Air Base
(Bldg. 766)
784-6614

There has been a lot of questions from the communities regarding Veterinary Services:

Surgery appointments are first come first serve basis via phone appointments. There is no benefit in scheduling in person. If someone calls in for a surgery before a client is seen in person, the client on the phone will get the surgery slot.

Here are the hours of operation:

M,T,W,F: 0900-1200; 1300-1600
Thursday: 1300-1600

Last business day each month:
-Open 0900-1200
-Closed 1300-1600 for inventory

Closed for Lunch: 1200-1300
Closed on Federal Holidays
Wellness/Sick call: M-F (by appt)

Surgeries: Tue. & Wed. (by appt call Monday morning; schedule opens up 4 weeks in advance; no need or benefit to scheduling in person)

Dentals: Friday (by appointment)

Closed in observance of all Federal holidays.

PURCHASED CARE SECTOR PROVIDERS

AREA I

- Dongducheon Jooang St. Mary's Hospital 031-863-0550 (ext.104)
- Inje University Ilsan Paik Hospital 031-910-7777
- Uijeongbu St. Mary's Hospital 031-820-3636

AREA II

- AHS Korea 02-749-7915
- Yeouido St. Mary's Hospital 02-3779-2212
- Seoul St. Mary's Hospital 02-2258-6818
- Drs. Woo&Hann's Skin and Laser Clinic 02-777-2991
- The Mindcare Institute 070-8888-8277
- Hangang Sacred Haert Hospital 02-2639-5025
- Severance Hospital 02-2228-5819
- Cha Gangnam Medical Center, Cha University 02-3468-3127
- Seoul National University Hospital 02-2072-4100
- Tong Il Medical (DME only) 02-766-2433
- Ewha Womens University Mokdong Hospital (West) 02-2650-5890
- EZPAP Care (DME only) 10-3106-0414
- Asan Medical Center 02-3010-5001
- Samsung Medical Center 02-3410-0203
- Withmed (Southwest;DME only) 031-395-4397
- Inha University Hospital (West) 032-890-2080

AREA III

- Good Morning Hospital 031-659-7736
- Pyeongtaek St. Mary's Hospital 070-5012-3420
- Hwain Metro Hospital 041-622-1300
- Dankook University Hospital 041-550-7640
- Hallym University Dongtan Hospital 031-8086-2300
- South Seoul Hospital 031-218-0761
- Ajou University Hospital 031-219-4010
- St. Vincent's Hospital 031-249-8016
- Seoul National University Bundang Hospital 031-787-2038
- Cha University Bundang Medical Center 031-780-5168

AREA IV

- Hyosung Hospital 053-766-7073
- Yeungnam University Hospital 053-640-6645
- Keimyung University Dongsan Medical Center 053-250-7997
- Daegu Fatima Hospital 053-940-7520
- Women Medi Park Hospital 054-450-9870
- Gumi Cha Hospital 031-219-4010
- Samsung Changwon Hospital 055-290-6229
- Pohang St. Mary's Hospital 054-260-8105
- Busan St. Mary's Hospital 051-933-7061
- Dongeui Medical Center 051-850-8523
- Ilsin Christian Hospital 051-630-0411

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Recently combat medics at the Brian D. Allgood Army Hospital conducted field birthing training using the Obstetric SimMom and Newborn SimBaby for the first time. Field birthing is mostly precautionary training and is not needed often due to the procedures implemented for the health of expecting mothers. For more see story on pages 42-43. (Photo by Sgt. Broderick Hennington, 65th Medical Brigade Special Correspondent)



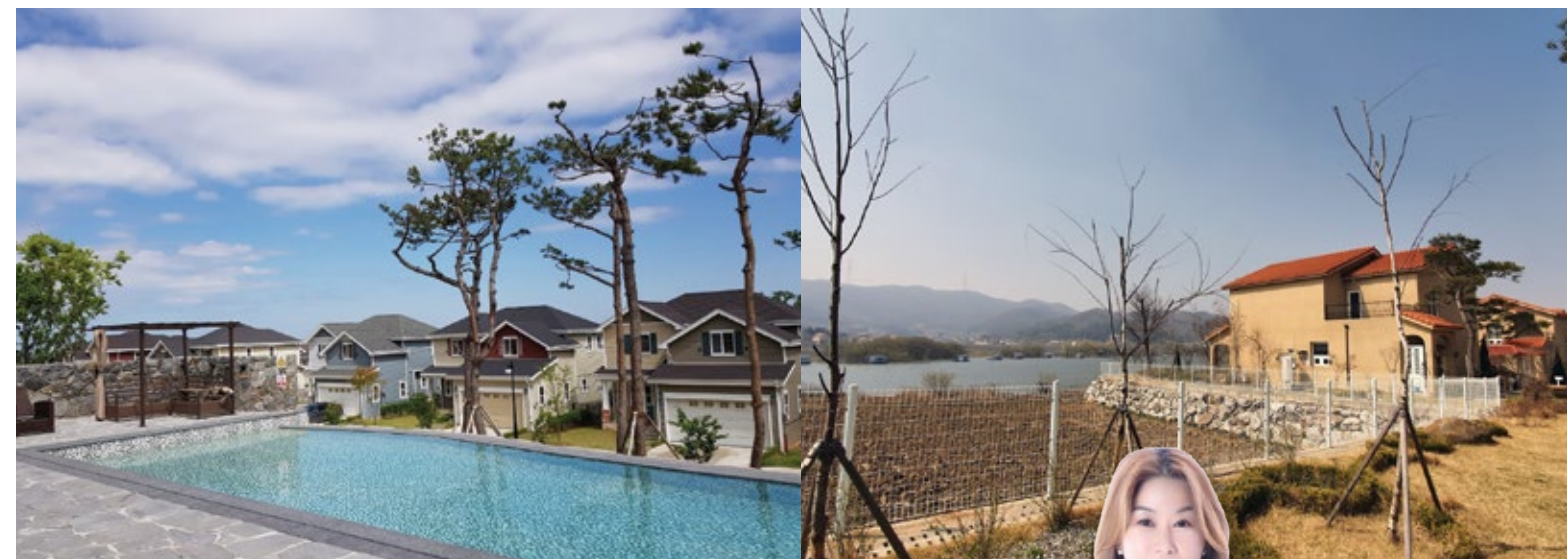
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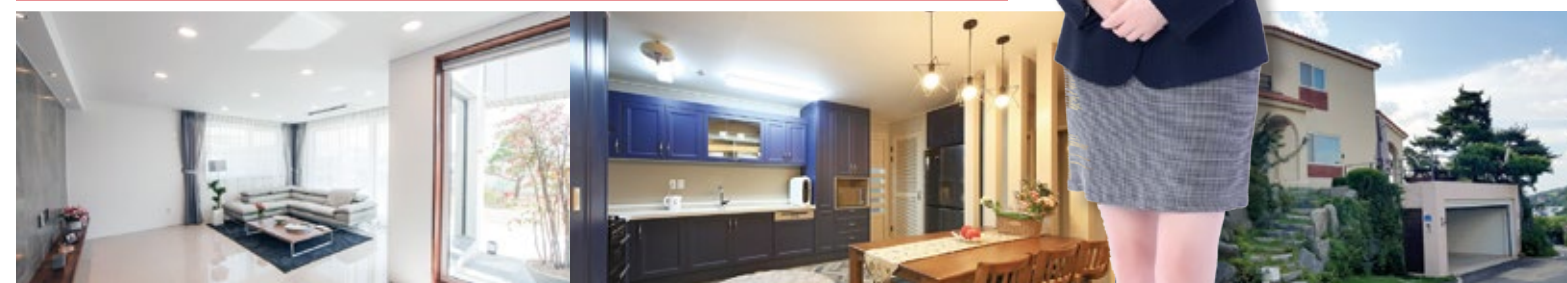
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Osan Air Force Base (K-55): Exchange Mall (Unit 2038, Bldg. #965) Pyongtaek, Gyeonggi-do, Korea | 070-7597-0132
Camp Walker: Exchange Mall (Unit 15497, Bldg. #310) Daegu, Korea | 070-7725-9887
Kadena Air Force Base: Kadena Shopping Mall, Bldg. 412 Kadena Air Force Base, Okinawa, Japan | 036-868-2278
Camp Foster: Concession Mall, Bldg. 1002, Camp Foster, Okinawa, Japan | 098-971-9307
Yokosuka Naval Base: NEX Home Gallery Bldg. 1559, Yokosuka Naval Base, Yokosuka, Japan | 046-896-5070

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