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Medics Forward

"Any mission, Anywhere!"

Volume 1, Issue 3 Heidelberg, Germany September 2003

Patient liaisons soothe health care concerns

By Lisa Horn
Stars and Stripes

Janice Langford knows how terrifying the word cancer is.

Almost five years ago, the Illesheim pre-K teacher was diagnosed with ovarian cancer and received treatment at a German clinic. Four days after first hearing the C-word from her doctor, Langford had major surgery to remove the tumor. Since then, she has had three other surgeries and celebrated her fourth year of remission in April.

Langford credits surviving cancer to her German doctor and the American doctors at Illesheim who collaborated with him. She credits surviving the ordeal to her patient liaison, Gudron Williams. Patient liaisons help make appointments, translate and assist with insurance claims as well as explain the contents of records and prescriptions.

"I would not have survived this treatment if not for these people," Langford said. "Gudron went out of her way to help. She went the extra mile." At the start of her chemotherapy, Langford was shocked to discover that each her treatments would cost $6,000, all of which was required up front.

Williams negotiated with Langford's doctor who agreed to accept a deposit of $3,000 and waited months for her insurance to pay the rest.

Lesley Lehwald-Verron, center, sits with Tina Pauley, left, while her husband, Master Sgt. Scott Pauley, and sons, Adam, 13, and Matthew, 11, listen in the background. Lehwald-Verron has become a part of the Pauley family in recent months as she helps Tina manage her illness.
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Photo by Lisa Horn, *Stars and* Stripes

Williams accompanied Langford to all of her appointments, gave her a medical phrase book and helped her purchase a wig, several hats and a turban in case Langford's hair started to fall out due to treatment. (It didn't.)

Williams' compassion and availability has earned her the respect of hundreds of patients and two-time recognition as a Cares Award winner.

The Army hospital in Würzburg, which has 20 patient liaisons, presents the award to those who go above and beyond their duty, according to Capt. Erica DiJoseph, executive officer of the Illesheim Health Clinic.

"The patient liaison program is a bridge between American and German health care," Williams said. "I love [this] job and helping people."

"Kim Brock, another Illesheim teacher, also has come to rely on Williams. Brock has made three hospital visits in the past four years, two of which were for major surgeries. "All three times Mrs. Williams was there," Brock said.

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Operation Iraqi Freedom
&
Operation Enduring Freedom
as of September 10, 2003

Clinical Operations

- OIF patients 5,873
- OEF patients 1,808

USAMMCE

- Line items 185,166+
- DoD customers 435+
- $131 million

Don't forget...

- Sept. 16–19
  Medical Logistics Customer Workshop
  USAMMCE
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- Sept. 20
  USAREUR
  Retiree Appreciation
  Village Pavilion,
  Heidelberg Germany
- Sept. 29–Oct. 2
  Medical-Surgical Conference
  Hotel Bayerischer Hof,
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  click *About ERMC*
- Oct. 5–9
  Medical Service Corps Symposium
  Village Pavilion,
  Heidelberg Germany
  register @
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- Oct. 5–9
  Annual Dental Training Conference
  Garmisch, Germany
  register @
  www.erdc.healthcare.hqusareur.army.mil/

"I would not have survived this treatment if not for these people."

Janice Langford speaking about the patient liaison program

Brownies of Troop 20, Patrick Henry Village, Heidelberg, Germany beautify the ERMC headquarters building Sept. 18, 2003. Led by Mrs. Jodi Wooldridge, wife of ERMC Executive Officer Maj. Stephen Wooldridge, the troop planted flowers purchased with troop funds. All of the girls received coins from ERMC Command Sgt. Major. Gregory Griffin.

Photo by Maj. Andrea Lester
ERMC G-4, Logistics

Patient liaisons soothe health care concerns

Continued from page 1

Although her family tried to convince her to come home in the summer for one of her surgeries, Brock had complete faith in the German health care system. "I had 120 percent trust in the doctor I had here," Brock said.

Heidelberg patient liaison, Lesley Lehwald-Verron, assures her patients that German health care is just as good or better than American care. While there may be some cultural differences, most German doctors speak English and many have received some of their training in the United States, she said.

Randy Harshman, a military retiree living in Germany, said, "I think there's a widely held myth that the German system is an extremely difficult system to deal with. What I'd like to do is encourage people not to be afraid to go on the economy."

Tina Pauley of Mannheim, who had a tumor removed from her lung earlier this year said, "Once [the doctors] got to know me, they got more confident with their English."

Her husband, Master Sgt. Scott Pauley, was deployed to Turkey in support of Operation Iraqi Freedom when Tina was admitted into the hospital.

"As soon as I got back, [I] turned in my weapon and came straight up here," Pauley said. "The patient liaison made it to my wife before I did.

"I could take care of things and just know that everything was going to come together. I appreciate very much having Lesley.

"I thought I understood Tina, too, but... I missed a lot the signs that needed to be explained to Tina," he said. "Lesley was available to identify with that and say, 'Scott, she needs this,' and she also bridged the language barrier and the man's idea of things."

Lehwald-Verron recommends patients not be afraid of asking plenty of questions. Harshman, who suffered a mild stroke recently, agreed. "I think it is incumbent upon the patient to ask questions if they are concerned about their health care," Harshman said.

And for all the questions unanswered, the patient liaison is always there to help, said Maj. Timothy Hoiden, chief of managed care at Landstuhl Army Regional Medical Center.

"[Patients] are not out there alone," Hoiden said. "We're here to help."

The patient liaison program is available at all 52 medical treatment facilities in Europe.

To find out more about the patient liaison program, call your local TRICARE service office.

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Staff chaplain named *El Paso Times* Woman of the Year

Story by Sgt. Phillip Breedlove
LARMC Public Affairs

Landstuhl, Germany – El Paso was looking for a few good women and they found one at Landstuhl Army Regional Medical Center. Reserve Chaplain Maj. Felicia Hopkins, an El Paso native currently serving as a staff chaplain at LARMC, was recognized as "Woman of the Year" during the *El Paso Times* Woman of the Year annual award ceremony.

A total of 10 awards were given out during the ceremony Aug. 8. Among the awardees was Heroine of the Year recipient Spc. Shoshana Johnson, former prisoner of war that was wounded and captured with Pfc. Jessica Lynch during Operation Iraqi Freedom. Other awards given included the Executive, Teacher, Volunteer, Mother, Daughter, Drill Sergeant, Soldier, and Inspirational Woman of the Year. "I knew I had won something, but I didn't know until that night that I was THE Woman of the Year," Chaplain Hopkins said. She was "shocked and surprised."

Hopkins was told four days before the event that she had won El Paso Woman of the Year, but she thought it was for Volunteer Women of the Year. She knew that in order to win Woman of the Year, she had to excel in several categories, including Executive, Teacher, Volunteer, Mother and Daughter of the Year.

Hopkins could have been nominated under any of the categories listed above. The story goes that several individuals from her family, St Mark's United Methodist Church, University of Texas El Paso (UTEP) and William Beaumont Army Medical Center (where she served last year during Operation Noble Eagle) got together to nominate her the" Woman of the Year." "They said I excelled in all areas," Hopkins said. "That's what they said, not what I said."

Besides being a Major in the United States Army Reserves, she is a teacher at the UTEP, an associate pastor at St. Marks United Methodist Church, former director of UTEP's Wesley Foundation / United Campus Ministry, the former director of the PRAXIS program, and a mother of two.

A large part of her nomination came from her volunteer work. While serving as a Campus Minister for the Wesley Foundation/United Campus Ministry at the UTEP, she helped re-establish and advance the PRAXIS program a Greek word for human action. The program is a community service based volunteer learning and teaching module. PRAXIS encourages college students at UTEP to reach out in to the community and volunteer. With the help of Hopkins, the program enrolled over 4,000 members in 93 participating agencies in El Paso, Texas and Juarez, Mexico the last five years. It is the largest community based program in the University of Texas system.

"This is an important program," Rev. Hopkins said. "Not many people in El Paso go to college; and if we can get college students out in the community, children from all over will start to envision themselves in the same roles and believe that they too can go to college."

Although Hopkins was nominated specifically for this program, she said her most rewarding volunteer experience was her Phat Sunday dinner program where her student ministry provided food for approximately 80 to 100 college students at the end of each month.

"Most college students don't have a lot of extra money lying around and they are usually broke at the end of the month," Hopkins said. "We would visit students in the dorms and bring them food."

She knew the program was important, but the importance didn't hit her until she caught one of the graduate students sneaking into the line for seconds and thirds. She told him to wait until all students had their food, to which he replied, 'You don't understand. This is the first meal I've had in weeks.' "From that point on, I knew I'd be doing this every year."

Another part of her nomination included her work as a teacher. Hopkins said she wasn't expecting to be nominated for being a teacher. Hopkins has taught the History of the African American Church, and several other Bible courses at UTEP. She considers her work rewarding.

"Being a teacher is like being a seed planter," Chaplain Hopkins said. "When it is all said and done, you don't know if anyone will remember what you have said. When students leave my class, all I really know is that some seeds have been planted and I pray that one day the knowledge that I have given will be instrumental to them in some way."

Hopkins said she's not sure when she will return home, but she plans to make the most of her time while she's here. El Paso may have been looking for more people like Hopkins, but LARMC gets to keep her for a little while longer.

LARMC

Maj. Felicia Hopkins
El Paso Times
Woman of the Year

"I knew I had won something, but I didn't know until that night that I was THE Woman of the Year," Chaplain Maj. Hopkins said.

In Feb. 2003, Chaplain Maj. Hopkins was activated with the 2291st U.S. Army Hospital and in March 2003 she was cross-leveled to the 94th U.S. Army Hospital and deployed to LARMC. She is currently serving as a staff chaplain, offering comfort to service members medically evacuated to LARMC from downrange while fulfilling the spiritual needs of the hospital staff that treat them every day.

"I love the Army and I love soldiers. If I didn't, I wouldn't be an Army Chaplain. I'm just a soldier with a cross on my shoulder."

H-MEDDAC

Capt. Jane Christensen, Chief Nurse, Babenhausen reports, "On a weekly basis, our medics are developing and maintaining their vaccination skills. By managing the Rotational Readiness Program, our nurses have been able to closely monitor each unit's immunization status. In the near future, I expect that Babenhausen's rear detachment and re-deployed soldiers will be 100 percent fully immunized!"

Heidelberg MEDDAC doctor, Lt. Col. Emil P. Lesho co-authored the cover article in the August 15, 2003 edition of "American Family Physician" on Clinical Pharmacology: Managing Issues Related to Antiretroviral Therapy .

You can check it out

@

www.aafp.org/afp/20030815/675.html/

Babenhausen implements rotational readiness program

By 1st Lt. Lisa Bohler
Executive Officer
Babenhausen Health Clinic

Babenhausen, Germany — In response to the requirement that military units maintain medical readiness, personnel at the Babenhausen Health Clinic have implemented a new initiative called the Rotational Readiness Program for their local commanders. A soldier's medical readiness consists of several factors to include current immunization status. The Rotational Readiness Program ensures that soldiers' immunization status are reviewed regularly and kept current.

In the past, immunization updates were conducted for entire units as a part of the pre-deployment process (PDP). Although this procedure was effective in updating immunizations, the massive PDP rotations were a strain for the limited number of available medical personnel at the small health clinic. Furthermore, the PDP process was time consuming for both medical personnel and participating military units in that each soldier's medical record was individually screened at the PDP site. Then, if the soldier required an immunization, he or she would be sent to another line to receive an immunization. In the end, the soldier could wait all day to receive one shot or, what many soldiers dread, multiple shots.

With the Rotational Readiness Program, as a part of the pre-screening process, nursing personnel utilize a medical database, Medical Protection System (MEDPROS), to produce a by-unit report displaying each soldier's immunization status. To ensure data quality is maintained, the medical records for each soldier requiring an immunization are screened as well.

Next, a roster containing no more than 30 names is compiled and sent to unit commanders indicating which soldiers should report for an immunization update appointment at the health clinic. Soldiers having appointments receive their immunizations and return to their units within two hours. The whole process requires only three—four medical personnel.

After the soldier has received an immunization, his or her immunization status is updated immediately by nursing personnel through another medical database, Medical Occupational Data System (MODS). Both MEDPROS and MODS are excellent tools that allow medical personnel to update medical data and receive current unit medical readiness status. By using the various immunization profiles available in MEDPROS, commanders can quickly and accurately assess the medical status of their units.

The Rotational Readiness Program has benefited the health clinic personnel in more ways than one. Capt. Jane Christensen, Chief Nurse of Babenhausen reports, "On a weekly basis, our medics are developing and maintaining their vaccination skills. By managing the Rotational Readiness Program, our nurses have been able to closely monitor each unit's immunization status. In the near future, I expect that Babenhausen's rear detachment and re-deployed soldiers will be 100 percent fully immunized!"

Although the requirement for medical personnel to maintain a presence at Babenhausen's PDPs won't be eliminated, the strain felt by medical personnel, soldiers and commanders will be significantly reduced. By actively monitoring unit medical readiness on a monthly basis and conducting unit immunization appointments on a weekly basis, Babenhausen Health Clinic has been able to assist local commanders in maintaining their medical readiness.

American Family Physician™
A peer-reviewed journal of the American Academy of Family Physicians August 15, 2003

The cover article in the August 15, 2003 edition of "American Family Physician" is on Clinical Pharmacology: Managing Issues Related to Antiretroviral Therapy by US Army MEDDAC Heidelberg doctor's Lt. Col. Emil P. Lesho and Daniela C. Gey, University of Heidelberg School of Medicine, Heidelberg, Germany. Dr. Lesho is enjoying a three-year fellowship on infectious diseases at Walter Reed Army Medical Center.

Basic life support keeps young resident alive

By Roger Teel
W-MEDDAC Public Affairs

Wuerzburg, Germany — Being able to perform cardio-pulmonary resuscitation, or CPR, and other life support measures in an emergency situation is everyone's responsibility, according to Sandy Kowdley, a resident of Wuerzburg's Lincoln Housing.

A recent incident backs up her claim.

"The afternoon of July 23, Tonya Colombo burst into my apartment screaming that something was wrong with her niece, 10-month-old Alyssa," Kowdley said.

"Tonya said the baby was unresponsive and begged me to help.

"At their apartment, Alyssa's eyes were rolled up, she was not breathing and seemed lifeless. I immediately started CPR and pumped her heart since I did not sense a heart-beat. I also alerted the military police to send an ambulance.

"I kept giving her CPR until the military police arrived a few minutes later, then handed the child over to them. The MPs rushed the girl to the emergency room at the Army hospital," Kowdley said.

Alyssa, the 11-month-old, daughter of 1st Lt. Ron and Alexa Colombo, responded quickly in the emergency room and was not hospitalized.

Kowdley now insists that CPR and other life saving techniques should be a family priority in every household.

Sandy Kowdley holds a healthy 11-month-old Alyssa Colombo. Kowdley sustained Alyssa with cardio-pulmonary resuscitation July 2.
Photo by Roger Teel, W-MEDDAC Public Affairs

"I read up on CPR and other resuscitative techniques when I was pregnant with my first child. It seemed important to know how to administer CPR and the Heimlich Maneuver in the event something ever happened to my children. Kowdley's husband, Maj. Gopal Kowdley, is a surgeon and commander of the 67th Forward Surgical Team.

"I am always distressed to hear about children who could have avoided serious injury if only their parents or providers had known CPR, or about children who choked on toys because no one could administer the Heimlich. So I read life support books but never really thought I would need to use that knowledge."

Every community resident should have basic life saving training, Kowdley said.

"This incident has made me aware that everyone should know CPR, first aid, and other basic life support techniques. CPR can limit damage in the event of a heart attack in an older person. Medical help may not arrive quickly and if no life saving measures are taken during these precious seconds the victim's condition could worsen or they may even die," Kowdley said.

She hopes people heed her call.

"I hope my actions helped save a child's life. And I hope others make the effort to learn basic life saving techniques," she said.

The American Red Cross offers continual training in CPR, first aid, and babysitting training classes. They also coordinate the "Healthy Pregnancy, Healthy Baby" training program conducted by Community Health Nurses. For information or to enroll, contact your local community Red Cross coordinator.

W-MEDDAC

67th Combat Support Hospital soldiers listen intently to Dr. Stanley Minkin, left, chief of academic surgery at the Uniformed Services University for Health Sciences, as he discusses treating war trauma during the August 5 Combat Trauma Symposium.

Photo by Scott Rouch, W-MEDDAC

"This incident has made me aware that everyone should know CPR, first aid, and other basic life support techniques.

CPR can limit damage in the event of a heart attack in an older person.

Medical help may not arrive quickly and if no life saving measures are taken during these precious seconds the victim's condition could worsen or they may even die," Kowdley said.

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Please contact DSN 314-371-2229 or 2592 for any questions.

Thanks for registering on-line!

Where's the dental bus?

- 5-10 Oct Garmisch
- 19-24 Oct Bremerhaven
- 26 Oct–7 Nov Vienna Rotterdam

Schedule subject to change

Dentists dine in

The Aug. 1, 2003 ERDC Dining In merged new Kaiserslautern leaders with the community and raised over $500 for the Landstuhl Fisher House.

Photo by Annalicia R. McIntosh, ERDC

By Annalicia R. McIntosh
ERDC Command Section

Kaiserslautern, Germany – The Europe Regional Dental Command hosted a Dining In on Aug. 1, 2003 at Armstrong's Club in Kaiserslautern Germany.

More than 110 officers and NCOs enjoyed the festivities. The Dining In served as a wonderful forum to bring together new commanders and leadership throughout the Kaiserslautern area.

Maj. Gen. Bennie Williams, Commander, 21st Theater Support Command , was the guest of honor and Col. Conrad Bodai, Commander, Europe Regional Dental Command, hosted the evening as president of the mess. Other guests at the head table included Brig. Gen. George Wells, Deputy Commanding General, 21st Theater Support Command, Col. Rhonda Cornum, Commander, Landstuhl Army Regional Medical Center (LARMC), Col. Kory Cornum, Commander, 86th Medical Squadron, Col. David Corman, Commander, 86th Dental Squadron, Col. William Rivard, Chief of Staff, LARMC and 415th Base Support Battalion Command Sgt. Maj. Olga Martinez.

Members of the mess who committed infractions of the rules, offered donations to benefit the Landstuhl Fisher House. Coupled with personal donations, the Dining In raised over $500.

www.fisherhouse.org

DSN 314-486-6630

Army soldier receives General Benjamin O. Davis Jr. Award

Heidelberg, Germany – Lt. Col. Patrick D. Sargent, commander, US Army 421st Medical Evacuation Battalion, 30th Medical Brigade, is the first US Army service member to be awarded the prestigious General Benjamin O. Davis, Jr. Award by Tuskegee Airmen, Inc. In the past the award had always gone to US Air Force Personnel. The General Benjamin O. Davis, Jr. Award is presented annually to a field grade officer who has exhibited outstanding performance in professional and community service. Sargent received the award during an Aug. 8 ceremony in Denver, Colo.

The award honors General Benjamin O. Davis, Jr., who commanded 450 black fighter pilots in the aerial war over North Africa, Sicily and Europe, flying 15,553 sorties and completing 1,578 missions. The 15th US Army Air Forces' first black general rose to the rank of Lt. Gen. and retired in 1970. He received his 4th star on Dec. 9, 1998 from President William J. Clinton.

"Being honored with this award is absolutely one of the highlights of my military career," said Sargent. "There are no words that can aptly express the admiration and respect I have for the members of the Tuskegee Airmen Inc., organization. Gen. Davis was the pre-eminent officer, gentleman and combat commander – being honored in his likeness with this award is a very humbling experience."

Sargent added, "I feel the Tuskegee Airmen are arguably the pioneers of the non-violent protest, which became vogue in the late 1950s and early 1960s. Before Dr. Martin Luther King Jr. became famous for organizing non-violent protests, the men and women associated with the Tuskegee Experiment perfected the non-violent protest philosophy dispelling the ontological myths of the time, which stated Blacks didn't possess the intellectual capacity to fly, or the personal or moral courage required to become pilots. Gen. Davis, as the commander of the 99th Pursuit Squadron and his men, shattered this myth and forced the War Department to recognize Blacks as vital members of our Armed Forces."

According to Col. Donald Gagliano, Commander, 30th Medical Brigade, Sargent is cut from the same swatch of cloth as the original Tuskegee Airmen. "This exemplary senior Army aviator is the quintessence of excellence. He is the epitome of the Tuskegee Airman and his character, demeanor and professionalism are reflective and very similar to that of Gen. Benjamin O. Davis Jr.," said Gagliano.

Sargent commands the Army's largest Medical Evacuation Battalion – comprised of 45 Blackhawk helicopters and 40 Ground Ambulances, 118-wheeled vehicles, 591 personnel, and $450 million of equipment and an operating budget of $4 million. He is also the first African-American to command a Medical Evacuation Battalion in combat. His battalion is responsible for providing life-saving aeromedical and ground evacuation throughout the EUCOM, USAREUR and V Corps Areas of Responsibility. While deployed to Kuwait and Iraq, with the mission to save life, limb and eyesight, his flight crews conducted medical evacuations under direct enemy fire, endured severe environmental conditions including extreme heat, reduced visibility from intense sandstorms, poor illumination and night operations with the aid of night vision devices. His was the only unit conducting hazardous over water flights to evacuate casualties to the hospital on the Navy's USS Comfort. Sargent served as a Congressional Fellow and Director of Congressional Operations for the Army Surgeon General. He participated in the Washington DC school district's Everybody Wins Program where he had the opportunity to share the gift of reading on a weekly basis with underprivileged children. In the German Wiesbaden community, with his battalion, he supported the Wiesbaden American Middle School by providing support for health screening and by volunteering to support the school's SAVVY program – Students Against the Victimization and Violence of Youth. Sargent is a gifted-speaker and routinely speaks at local Secondary Schools and Military Ethic Observances.

In 1985 Sargent graduated from Florida State University, Tallahassee, Fla., with a degree in Political Science and as a Distinguished Military graduate and was commissioned a second lieutenant in the Regular Army. He earned a master's degree in Human Resource Development from Webster University, St. Louis, Mo.

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Col. Jettaka Signaigo was the guest speaker at the 415th BSB Women's Equality Day Celebration held at the Armstrong's Combined Club on Aug. 26, 2003.

Women's Equality Day commemorates the 1920 passage of the 19th Amendment to the United States Constitution, granting women the right to vote.

Medical Logistics Customer Workshops

- Dec. 9 – 12
- March 2 – 5
- June 8 – 11

Sign up on-line!

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Com 06331-86-7412

Twelve soldiers from the United States Army Medical Materiel Center, Europe (USAMMCE) and 418th Medical Logistics Company, Fort Sam Houston, Texas, were inducted into the Noncommissioned Officer Corps of the United States Army on Aug. 28, 2003 in a ceremony held at the Armstrong's Combined Club in Kaiserslautern, Germany.

Left-right: Inductees Sgt. Robert Paradis, Sgt. Matthew Barlow, and Sgt. Alunda Hopkins are currently assigned to the Information Management Division, USAMMCE. Sgt. Brandon Satterwhite, Sgt. Angela Nicolay, Sgt. Simon Ofosu, Sgt. Wa Poung, Sgt. Erika Street, Sgt. Leroy Priester, Sgt. James Welsh, Sgt. Marc Foti, and Sgt. Debanish Velez are assigned to the 418th Medical Logistics Company and are currently deployed to USAMMCE in support of Operations Enduring Freedom and Iraqi Freedom.

Training....the cornerstone of readiness

By Cheryl Navo
USAMMCE Public Affairs

Pirmasens, Germany – During the last two years medical support units experienced an increase in operational tempo unmatched since Vietnam. Units are supporting multiple theaters of operation from the Balkans to Southwest and Central Asia and points in between, performing missions that range from combat support to humanitarian assistance. This increase in operational tempo has, undoubtedly validated the readiness planning implemented prior to deployment. Combatant commanders can tell you that the key to mission success is constant focus on readiness, and the cornerstone of readiness is training. Whether you are assigned to a TO&E or TDA unit, understanding all aspects of your job is critical to the success of your mission.

With this in mind, the US Army Medical Materiel Center, Europe (USAMMCE), located in Pirmasens, Germany, will once again conduct their medical logistics workshops. The first workshop, scheduled Sept. 16-19, 2003 focused on the information systems used to order and maintain medical supplies. Specifically, the workshop offered training in the set up and use of the Theater Army Medical Materiel Information System Customer Assistance Module and the USAMMCE Customer Assistance Module. Attendees will learn how to research, order, and track shipments of medical supplies. Attendees will also learn about operations at USAMMCE and get to know the personnel who will be supporting them.

Workshop registration can be completed on-line on the USAMMCE homepage:

https:/www.pirmasens.amedd.army.mil

Attendance is limited to 16 participants and supervisor approval is required. Please ensure that you have your supervisor's approval prior to signing up. Additional workshops are tentatively scheduled for Dec. 9-12, 2003, March 2-5, 2004 and June 8-11, 2004. Upcoming workshops will be announced on the USAMMCE homepage and via e-mail to all USAMMCE customers.

For more information contact:

USAMMCE
Customer Support Division

DSN 314-495-7412
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(49) (0) 6331-867412

Patient satisfaction on target for TRICARE

By Troy Kitch
TRICARE Europe Public Affairs

Sembach, Germany — According to the 2003 *Health Care Survey of DoD Beneficiaries, TRICARE Europe beneficiaries rate* the health care they receive overseas comparably to the care they receive in stateside TRICARE regions.

Additionally, beneficiary feedback compiled from TRICARE Europe comment cards points to a high level of patient satisfaction with host nation provider care — 94 percent of respondents rate the quality of their medical care in Europe as "Good" or "Excellent." TRICARE Europe collects these comment cards from beneficiaries who are referred to a host nation provider in European and Central Command.

Both measurement tools help decision makers improve the Military Health System and the TRICARE system. With both surveys, beneficiaries are asked to comment on the quality of their health care experience based on factors such as ease of access, communication and service, and ratings of doctors.

"What these results indicate is that our beneficiaries generally perceive that the care they receive in Europe stacks up quite well to the care the receive back in the states," said Col. (Dr.) James Rundell, TRICARE Europe Executive Director, "They are also quite satisfied with host nation care, which is particularly encouraging considering that beneficiaries here in Europe often face foreign languages and cultural differences."

While some aspects of host nation medical care may not be exactly the same as in the U.S., Rundell noted that the providers in the TRICARE Europe Preferred Provider Network are fully qualified, quality medical providers. Added to this, TRICARE Service Center staff members are available to help bridge cultural and language gaps. These personnel understand the local culture and clinical practice environment and assist beneficiaries when they are referred for health care in on the economy.

"Facilities and processes may be different than many of us may be used to, but living with cultural differences is part of serving overseas," Rundell said.

"Our goal at TRICARE Europe is to ensure that all beneficiaries receive quality outcomes of care. The DoD survey, combined with the data we collect direct from beneficiaries here in Europe, tell us that we are making great strides towards this goal," he added. TRICARE Europe maintains an active quality-monitoring program to ensure that beneficiaries consistently receive the best possible care from members of the TRICARE Europe Preferred Provider Network. If a military Medical Treatment Facility finds that a provider is not meeting its expectations, they have the option to discontinue the PPN agreement with that member. TRICARE Europe's PPN agreements are reviewed for renewal on an ongoing, regular basis.

"The providers in our PPN represent the best-available host nation providers in Europe, Africa, and the Middle East," Rundell said, "We're proud of the relationships we have developed over time with providers around Europe, and we're confident that our beneficiaries will be satisfied with the care they receive. But Medical Treatment Facilities and TRICARE Europe need to hear about it when patients have concerns or questions about something that has happened during a host nation medical encounter."

It is very important that beneficiaries return TRICARE Europe patient customer comment cards. TRICARE Europe centrally collects patient feedback to look for trends and patterns that will help MTFs identify and best use the highest quality providers. Beneficiaries are also urged to complete and return the DoD survey if they receive one in the mail to help improve the Military Health System.

The customer comment card is available at:

https://telemed.europe.tricare.osd.mil/main/commentcard/commentcard.asp

The 2003 Health Care Survey of DoD *Beneficiaries is also available* online at

http://www.tricare.osd.mil/survey/hcsurvey/2003/q1/report/html/index.htm

TRICARE

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...94 percent of respondents rate the quality of their medical care in Europe as "Good" or "Excellent." TRICARE Europe collects these comment cards from beneficiaries who are referred to a host nation provider in European and Central Command.

TFME

Task Force Medical Eagle (TFME) continues its primary Level III medical support in Multinational Brigade—North (MNB-N), Stabilization Force-XIII (SFOR-XIII) and US Forces deployed throughout Bosnia-Herzegovina, Croatia, Hungary and Slovenia.

SFOR Mission

The Stabilization Force will deter hostilities and stabilize the peace, continue to secure environment by providing a continued military presence in the AOR, target and coordinate SFOR support to key areas including primary civil implementation orgaizations and progress towards a lasting consolidation of peace without further need for NATO-led forces in Bosnia and Herzegovina.

Vermont's 86th Medical Company (Air Ambulance) rotates teams in Bosnia-Herzegovina

- 700 flight hours
- Garnered four-out-of-five commendable ratings
- 100 percent Health Care Specialist transition—91W

Photo by Maj. Ora Rawls, TFME

86th Medical Company rotates teams in Bosnia

By Maj. Ora Rawls
TFME Executive Officer

Eagle Base, Bosnia-Herzegovina – No diamond in the rough – 86th Medical Company (Air Ambulance), TFME/SFOR-13, arrived prepared and ready. They set the bar high for future MEDEVAC operations.

As the Vermont National Guard team completed their "left-seat / right-seat" training for SFOR-14, they handed off an established and proven track record to a new team from the same unit. Through extensive training and battle drills, they made multi-faceted, dangerous taskings appear effortless.

Among their many accomplishments:

The 86th flew 700 hours in support of SFOR-13, including 14 "real-world" MEDEVAC missions with a 100 percent availability rate.

It garnered four-out-of-five commendable ratings during Aviation Operational Readiness and Safety Evaluations.

And 86th medics completed their Health Care Specialist—91W transition. One service member took home the top spot in the class.

The original militia company of the Vermont National Guard was formed on October 24, 1764.

Veterinary Civil Assistance Project (VETCAP)

TFME/SFOR held two VETCAPs in as many weeks in August.

The missions provided services to more than 470 sheep, horses, cows and other small animals in Lukici and Papraca, Bosnia-Herzegovina.

Veterinarian Services Officer, Capt. Bruce Lancaster teamed veterinary technicians from TFME, Task Force South and 416th Civil Affairs with the 35th Division's Physician's Assistant/Flight Surgeon, CPT Crystal Horsch, who saw over 60 patients as part of the August 28th VETCAP.

As a result, future VETCAPs plan to include a variety of health care professionals.

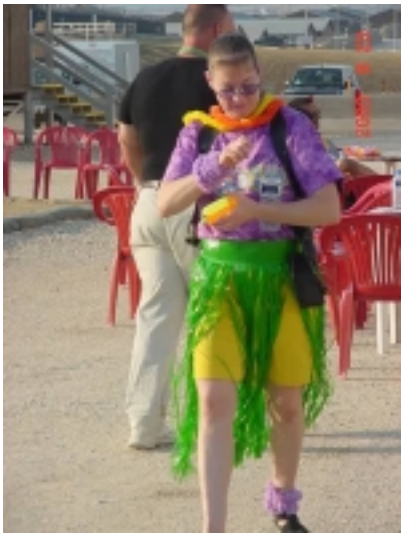
Spc. Scott Austin, TFME (left) and Spc. Stephen Summers, Task Force South, hold sheep for inoculations during an August 28th Veterinary Civil Assistance Project (VETCAP) in Papraca, Bosnia-Herzegovina.
Photo by Maj. Ora Rawls, TFME

Task Force Medical Falcon VIII organizational day

Story and photos by
Sgt. Claire Zink, TFMF Public Affairs

Camp Bondsteel, Kosovo – Task Force Medical Falcon VIII held a "luau" organizational day Aug. 23, 2003 that also provided a venue to remember departing United Kingdom soldiers. United Kingdom forces will be withdrawing from Task Force Medical Falcon in October and have been very instrumental and critical in the daily operation of the hospital. Task Force Medical Falcon at Camp Bondsteel, Kosovo has been the only bilateral, integrated U.S. / U.K. facility in the world. The luau was a great success! There was plenty of food, fun and games. The TFMF team even got a little crazy with the water guns.

Spc. Diedre Ryan pretending she's a participant in the limbo contest.



Capt. Dawn Urioste is definitely dressed for the occasion and preparing her weapon – LET THE WATER FIGHT BEGIN!

TFMF

- Provide level III combat health support to Multinational Brigade-East and Multinational Brigade-Central.
- Sustain or improve the training level of all medical MOS soldiers assigned to Task Force Medical Falcon and Task Force Falcon.
- Promote transition of healthcare to civil authorities.

The Kosovo Force is a NATO-led international force responsible for establishing and maintaining security in Kosovo.

This peace-enforcement force entered Kosovo on June 12, 1999 under a United Nations mandate, two days after the adoption of UN Security Council Resolution 1244.

AWARDS

...People will remain the

centerpiece of all we do—

Soldiers, civilians,

retirees and veterans...

The Army Vision

ERMC

"Caring for Our Nation's Best"
Medics Forward ... Any mission, Anywhere!

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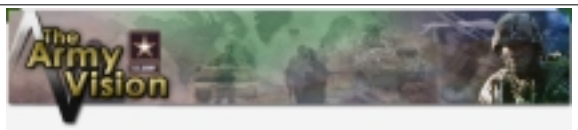

Military Awards Program — https://www.perscom.army.mil/tagd/awards/index.htm
Civilian Incentive Awards Program — http://cpol.army.mil/permiss/53.html
ERMC Awards — Joyce Luton DSN 314-371-3354

Staff Sgt. Steven W. Johns
Task Force Eagle SFOR-13
NCO of the Rotation

Photo by Maj. Ora Rawls, TFME

Meritorious Service Medal
Ward, Shon Sgt. 1st Class, HMEDDAC

Army Commendation Medal
Burns, William Maj., HMEDDAC
Downey, Charles Maj., HMEDDAC
Smith-Leon, Jorge Capt., HMEDDAC
Heinz, Tony R. 1st Lt., HMEDDAC

Army Achievement Medal
Barlow, Matthew Sgt., USAMMCE
Magar, Daniel Spc., USAMMCE
Millard, Jack Spc., HMEDDAC
OCamb, Timothy Spc., USAMMCE
Rowlands, James Spc., USAMMCE

On-the-Spot Cash Award
Davidson, Stacey, CHPPMEUR
Hayes, Marie, CHPPMEUR
Stangl, U., CHPPMEUR

Time Off Award
Carr, Erica, CHPPMEUR

Performance Award
Davidson, Stacey, CHPPMEUR
Hall, J, CHPPMEUR
Mitvalsky, Laura, CHPPMEUR
Oravetz, Christopher, CHPPMEUR

Length of Service—20 Years
Snippen, Mechthild, HMEDDAC

Length of Service—5 Years
Bell, Loretta, HMEDDAC
Bussie, Angela, HMEDDAC
Emberton, Tina, HMEDDAC
Gates, Edeltraud, HMEDDAC
George, Helen, HMEDDAC
Goebuel, Gulay, HMEDDAC
Goebuel, Hasan, HMEDDAC
Hall, Michale, HMEDDAC
Helgeson, Callie, HMEDDAC
Holifield, Mary, HMEDDAC
Jaeger, Cindy, HMEDDAC
Jasso, Lorenza, HMEDDAC
Johnson, Monica, HMEDDAC
Jones, Monique, HMEDDAC
Kraft, Irene, HMEDDAC
Kusmu, Elsa, HMEDDAC
Landreneau, Carolyn, HMEDDAC
Logan, Linda, HMEDDAC
Okechuku, Onwuka, HMEDDAC
Reformat, Kimberly, HMEDDAC
Robinson, Sheila, HMEDDAC
Saavedra, Nadezhda, HMEDDAC
Smith, Jackie, HMEDDAC
Snowden, Rita, HMEDDAC
Tibbs, Jennifer, HMEDDAC
Weilacher, Dale, HMEDDAC
Yousfi, Corinna, HMEDDAC

The U.S. Army Europe Regional Medical Command was activated on Oct. 16, 1994, under the command and control of the U.S. Army Medical Command, headquartered at Fort Sam, Houston, Texas. The command was originally designated the European Health Service Support Area, one of seven Army health service support regions throughout the world. To clarify beneficiary recognition of their mission, all health service support areas were re-designated regional medical commands in July 1996.

To meet the European challenge of the ever changing medical environment and the military force, Europe Regional Medical Command oversees and maintains the successful operation of the Army's 30 healthcare facilities in Germany, Italy and Belgium.