

MEDICAL NEWS

WARRIOR CARE WEEK SHOWS STRENGTH THROUGH TEAMWORK

By Airman Gabrielle Spalding
11th Wing Public Affairs

CARE events provide service to seriously wounded, ill and injured Airmen as well as veterans and their caregivers through caregiver support training, adaptive and rehabilitative sports events, recovering Airman mentorship training, and employment and career readiness classes.

“These events are meant to show warriors new ways to cope and give them tools to help with their recovery,” said Marsha Gonzales, Warrior Care Support branch chief. “They will find out that the issues they deal with are being experienced by others and learn new ways to [handle] with them.”

The week began with an opening ceremony during which Gen. David L. Goldfein, U.S. Air Force chief of staff, and his wife, Dawn Goldfein, stood alongside wounded warriors and members of the JBA community in a show of support.

Following the ceremony, warriors joined together to train in various sports such as wheelchair basketball, golf, sitting volleyball and archery across JBA. For Warrior athletes, the physical aspect of healing coincides with the mental.

“The adaptive sports altogether allow me to take my mind off all of the stressors that are going on in my life,” said Frederic Rosario, AFW2 sports mentor and athlete. “They allow me to relax as well as help with physical conditioning. When we win, it helps me with my morale.”

All the hard work during training days culminated in sitting volleyball, wheelchair rugby and wheelchair basketball tournaments between the U.S. Marines and Air Force on the final day of CARE week.

In addition to the athletic events, there were comedy, art and music resiliency programs, ambassador workshops, speaking events and employment boot camps.

During “painting with a purpose,” Greg Miller, AFW2 Art Therapy instructor and wounded warrior, with the support of his wife and caregiver, Heather Miller, conducted painting sessions. Greg went step by step, guiding people on how to paint landscapes like the Capitol Building or animals like koi fish, as a way for them to relax and heal.

“We all have different ways of expressing ourselves,” said Greg. “Whether it be with sports, art, music or writing, it’s important to seek some sort of avenue to deal with [ones] issues. It brings me joy to bring a spark in the eyes of the wounded warriors when they paint on canvas.”

Each day provided an opportunity for wounded warriors, caregivers and ambassadors to strengthen bonds and heal together. Many AFW2 members shared their experiences including Col. Nicole Malachowski, AFW2 program ambassador and the first female U.S.

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(Ohio National Guard photo by Sgt. Joanna Bradshaw)

Staff Sgt. Matthew Crabtree, a medic with the 285th Medical Company (Area Support) and a registered emergency room nurse, takes the vital signs of a child at a medical outreach station Oct. 27, 2017, in Jayuya, Puerto Rico. Assessments like these can help provide relief to parents who have a lot to deal with following the devastation of Hurricane Maria.

Soldier, Nurse, Dad: Ohio National Guard Soldier sets standard while serving in Puerto Rico

By Sgt. Joanna Bradshaw
Ohio National Guard Public Affairs

When it comes to children’s health, a parent will do almost anything for their child. Parents always ask themselves, “Who can I trust with my child’s medical care?”

One such medical professional who has earned his patients’ trust is Staff Sgt. Matthew Crabtree, a health care specialist with the 285th Medical Company (Area

Support) who has been deployed to Puerto Rico providing medical care to citizens impacted by Hurricane Maria.

Crabtree, who lives and works in Dayton, Ohio, is more than just a National Guard Citizen-Soldier, but a father, husband and also an assistant nurse manager in the emergency department at Dayton Children’s

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From the Staff
at Military
Medical News

Symposium shines light on Wounded Warriors' Recovery

By Andrew Damstedt
Naval Support Activity Bethesda

Recovering from a traumatic experience isn't easy and one that shouldn't be done alone.

At an event held Nov. 15, a few Sailors and their family members shared their recovery stories and how Navy Wounded Warrior Safe Harbor helped them during a difficult time in their lives.

"You don't have to go through it by yourself," said Naval District Washington Chief of Staff Capt. Roy Undersander during the Family Symposium at the USO Warrior and Family Center at Bethesda. "That's my main message for you today. That's what our staff is here for, that's what this program is for – to help you through and become a part of a community."

Guest speaker Aileen Kohl, a former Navy lieutenant, told of her experience caring for her husband, Army 1st Lt. Jonathan Kohl, who was injured in a helicopter crash in Afghanistan in March 2013.

"You have a major trauma that happens in your life and now everything's changed and nothing is the way it was

before and you have to figure out how that fits into your own life," Aileen said.

She recounted her husband's several injuries, including a traumatic brain injury, multiple spinal fractures, hip fractures, ankle fractures and rib fractures.

"He broke pretty much everything but his arms," she said.

He received care at Walter Reed National Military Medical Center until he was stable enough to be transferred to a polytrauma center in Richmond, Virginia. While there, she said she fought for him to be admitted into NeuroRestorative, a civilian provider specializing in post-acute brain injury rehabilitation.

"That's where the bulk of our recovery happened," she said. "That's where Jon made the biggest strides. This allowed me to return to work because I was still on temporary duty orders from my squadron – luckily they kept extending them. I had a great command."

Aileen was assigned to Navy Wounded Warrior Safe Harbor-Naval District Washington and said working there helped her learn a lot about the recovery process and how to help other caregivers.

She said she still receives support from her former coworkers. Nonprofit programs, such as Help Our Military Heroes and Operation Flying Heroes, have allowed them to get out in the community.

"The community support comes from the people you surround yourself with," Aileen said.

Accepting that her husband's disability would be with them throughout their lifetime was difficult.

"I had my fair share of 'I'm going to go in my room right now and cry for a while,'" she said. "That's OK. You need to realize that and allow yourself to feel these negative things but don't sit there and dwell on it. Sit there and say 'What can I do to make this better?'"

Another caregiver once told her how she hated a phrase frequently said when dealing with traumatic brain injuries.

"Everyone tells you brain injury takes years to recover from and that it's a marathon and not a sprint," Aileen said. "In brain injury, it's not a marathon. A marathon means you're going to cross the finish line; there's going to be an end. But really when you talk about brain injury or any other invisible illness, there's really no ending point."

The program included a panel of six Sailors and one caregiver who shared their experiences with Navy Wounded Warrior Safe Harbor. Realizing Wounded Warrior didn't just mean combat-related injuries was an eye-opener for some panelists as they realized that any wounded, ill or injured Sailor could benefit from the program.

"I didn't want to get involved in this program because 'Wounded Warrior' to me has always been combat related," said Hospital Corpsman 1st Class Carlos Valerio, who has gastric cancer. "Last year when I went to the [Wounded Warrior] games, I didn't want to participate. I didn't see myself as a Wounded Warrior."

Hospital Corpsman 2nd Class Renee Carranza shared a similar story. He said he learned of Navy Wounded Warrior Safe Harbor when he googled 'Wounded Warrior for Navy' and the program was among the top search results.

"At first I didn't feel like I was even worthy of it, because Wounded Warrior is somebody with a missing leg," said Carranza, who was diagnosed with post-traumatic stress disorder from war and military sexual trauma. "But after talking to them, they explained to me it's not just those kind of patients, its people with invisible wounds as well, which is myself."

April Ziegler, a retired Navy mass communication specialist, said she

didn't know how strong her support system actually was until after she received her multiple sclerosis diagnosis.

"People who stood by me and dropped everything when something went wrong was completely humbling," Ziegler said.

She said her illness has limited her in ways, but has also opened doors as she's worked with the Navy Wounded Warrior Safe Harbor program. One such opportunity was an internship working in the U.S. Senate.

"[Safe Harbor] helped me to realize that I can be strong and break through and make it through my hard times," Ziegler said.

THE SANDS OF CHRISTMAS

By Michael Marks

I had no Christmas spirit when I breathed a weary sigh,
and looked across the table where the bills were piled too high.
The laundry wasn't finished and the car I had to fix,
My stocks were down another point, the Dolphins lost by six.

And so with only minutes till my son got home from school
I gave up on the drudgery and grabbed a wooden stool.
The burdens that I carried were about all I could take,
and so I flipped the TV on to catch a little break.

I came upon a desert scene in shades of tan and rust,
No snowflakes hung upon the wind, just clouds of swirling dust.
And where the reindeer should have stood before a laden sleigh,
eight hummers ran a column right behind an M1A.

A group of boys walked past the tank, not one was past his teens,
Their eyes were hard as polished flint, their faces drawn and lean.
They walked the street in armor with their rifles shouldered tight,
their dearest wish for Christmas, just to have a silent night.

Then other soldiers gathered, hunkered down against the wind,
To share a scrap of mail and dreams of going home again.
There wasn't much at all to put their lonely hearts at ease,
They had no Christmas turkey, just a pack of MREs.

They didn't have a garland or a stocking I could see,
They didn't need an ornament-- they lacked a Christmas Tree.
They didn't have a present even though it was tradition,
the only boxes I could see were labeled "ammunition."

I felt a little tug and found my son now by my side,
He asked me what it was I feared, and why it was I cried.
I swept him up into my arms and held him oh so near
and kissed him on the forehead as I whispered in his ear.

There's nothing wrong my little son, for safe we sleep tonight,
our heroes stand on foreign land to give us all the right,
to worry on the things in life that mean nothing at all,
instead of wondering if we will be the next to fall.

He looked at me as children do and said its always right,
to thank the ones who help us and perhaps that we should write.
And so we pushed aside the bills and sat to draft a note,
to thank the many far from home, and this is what we wrote,

God bless you all and keep you safe, and speed your way back home.
Remember that we love you so, and that you're not alone.
The gift you give you share with all, a present every day,
You give the gift of liberty and that we can't repay.

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Music can help to heal traumatic brain injury

By Airman 1st Class

Caitlin Russell

Joint Base Elmendorf-Richardson
Public Affairs

Past and present service members and dependents suffering from traumatic brain injury can now take part in a Creative Forces music therapy program, a partnership between the National Endowment for the Arts and the DoD, designed to help them recover and rehabilitate at Joint Base Elmendorf-Richardson, Alaska.

According to the American Music Therapy Association website, music therapy is the clinical use of music to accomplish individualized goals within a therapeutic relationship by a professional who has completed an approved music therapy program.

The music therapy program is open to members who receive a referral from the 673d Medical Group TBI clinic at the JBER hospital.

Creative Forces music therapy began in April 2017 as a resource to support and provide training to community art providers, and invest in research on the impacts of art-based interventions like the music therapy program hosted at JBER.

For people with TBI, music therapy can be instrumental to rehabilitation. Music therapists use evidence-based techniques to stimulate speech, movement and cognitive emotions in patients.

"I joined the music therapy group after



(U.S. Air Force photo by Airman 1st Class Caitlin Russell)

Army Staff Sgt. Sean Young, 2nd Battalion, 377th Parachute Field Artillery Regiment training room noncommissioned officer, strums the guitar during music therapy with Danielle Kalseth, 673d Medical Operations Squadron creative arts therapist/ music therapist, at Joint Base Elmendorf-Richardson, Alaska, Nov. 2, 2017. Music therapy sessions help rehabilitate patients with traumatic brain injury.

finding out about it from the TBI clinic," said Army Staff Sgt. Sean Young, Delta Battery, 2nd Battalion 377th Parachute Field Artillery Regiment training room noncommissioned officer. "With TBI, I started losing memory and overall comprehension, but with music therapy I'm able to play the guitar and remember

riffs without thinking about it."

According to the United States Centers for Disease Control and Prevention website, approximately 1.5 million people in the U.S. suffer from a TBI each year; 85,000 people suffer long-term disabilities.

Music therapy is an opportunity for

Elective surgeries hone surgical skills, prepare medical team for combat

By Gloria Montgomery

Carl R. Darnall Army Medical Center

Inside Carl R. Darnall Army Medical Center's second floor surgery suite, surgeons and medical teams are busy honing their critical-care skills. In one room, a retiree is getting a new nose. A few feet away, surgeons are replacing broken knees and performing bariatric surgery on dependents to enhance their quality of life. Regardless of procedure or patient, every incision is an exercise in mission readiness.

"Often, when we think of readiness, we're only thinking of the warfighter or active-duty Soldier," said Lt. Col. Leah Triolo, an orthopedic surgeon and deputy of the Fort Hood hospital's surgical services. "But there're a lot of other green suitors who to go to support that warfighter, and that's our medical team."

That team, said Triolo, includes every member on the nursing and anesthesiology staff to the post-recovery and the ward staff who are taking care of the medications and providing more challenging care.

"Even though the surgery itself is elective, providing care to more complex cases, such as a total joint replacement, helps with the readiness of the entire team," she said.

That's why every surgery is value

added when it comes to saving lives, according to CRDAMC's surgical team.

Every surgery a training opportunity

"Everything we do is a training opportunity to better prepare us for such things as gunshot wounds, fractures and IED explosions when we do go downrange," said Lt. Col. Lance Taylor, who as chief of operating and anesthesia services, orchestrates the battle rhythm inside CRDAMC's 8-bay surgical suite.

The elective surgeries, too, said Triolo, offer the medical team exposure to different population groups who often have two or more complex issues that require extensive critical care.

"When we look at our total joint population, they represent a population of complex patients because of their medical comorbidities that we may not see when we treat only our active-duty population who are often young and healthy," said Triolo who has deployed twice to Afghanistan with Forward Surgical Teams. "It's the same with the bariatric care population who are often admitted to the intensive care unit post-op because of other pre-existing conditions that represent critical-care issues."

Maj. Sandra Martinez, a perioperative nurse who saw her share of injuries during her 2007-2008 deployment to Tikrit, Iraq, with the 82nd Airborne, said

repetition and training in controlled environments translate to surgical excellence and patient safety.

"All that training just clicks in when you are deployed," said Martinez, who is the chief nurse and officer in charge of CRDAMC's operating room suites. "That muscle memory just comes back to you regardless of the procedure and requires you to critically think about what's going on and what you need to do to get that patient stable."

Elective surgeries help refine skills

Open surgeries such as hernias or gastric bypass procedures also offer real-world lessons in anatomy.

"In theater, we get big cases like gunshot wounds to the abdomen and blast explosions, so what we do stateside exposes us to that open-body environment," said Capt. Carolyn Dillon, who deployed to the Helmand Province in Afghanistan in 2013-2014 and now serves as a circulating nurse who helps prep the patient for surgery and oversees operating room preparation. "We saw lots of wounds from IED explosions, burns and gunshot wounds to the arms and chest, so taking care of the patients there from our fixed experiences here, helps you think outside the box. You're just not going to have all the necessities in theater that you have here, so critical

people suffering from TBI to express emotions, promote insight and awareness, and strengthen neuropathways to restore memory, attention, concentration and multi-tasking.

"The Creative Forces music therapy program assists with the needs of military patients and veterans who have been diagnosed with TBI, as well as their families and caregivers," said Danielle Kalseth, 673d Medical Operations Squadron creative arts therapist/music therapist. "Not only do we provide clinical services, we want to provide patients and their families access to the arts in the community."

The music therapy program currently helps 30 patients rehabilitate from TBI, with new referrals every week. Patients who receive music therapy can participate in group or individual sessions, or a combination of both.

Music therapy is known to reduce stress, anxiety and pain, Creative Forces lets military members engage in a meaningful activity with others who are going through the same issues.

"Music therapy helps with more than just my memory; it helps with my mood too," Young said. "On days when I'm in a bad mood, playing the guitar is a great way to change that."

For more information on TBI and music therapy, contact the 673d TBI clinic at 580-0014 or the Creative Forces website at arts.gov/partnerships/creative-forces.

thinking is key. Overall, all the experiences refine your skills, so you kind of know a little bit about everything."

On average, the eight surgical teams, which consist of the surgeon, circulating nurse, technician and anesthesiologist perform about 30 surgeries daily.

It's important, said Taylor, who manages the surgical center's operating hub with rapid-fire precision, to keep the operating rooms hopping to maximize both operational resources and the surgical skills of the hospital's medical team.

"If the operating rooms weren't filled all the time, how would we get our skills?" said Martinez. "How would we know how to take care of our patients?"

For CRDAMC physician, Lt. Col. Paula Oliver, who recently returned from a combat deployment, every procedure regardless of simplicity or severity prepares surgeons for combat's worst-case scenarios.

"The more you operate, no matter the procedure, the more familiar you are with the anatomy and are exposed to complications and anatomical differences," said Oliver. "Even those who care for civilian trauma can't be completely prepared for the massive wounds we see with IED blasts, but the more you know, are exposed to, and are comfortable with, helps when you receive your first traumatic multiple amputee."

Preparing our Practitioners: CJTF-HOA hosts Tropical Medicine Course

By Staff Sgt. Allyson Manners
Combined Joint Task Force - Horn of Africa

Medical professionals from across the military services, foreign militaries and local community joined together to discuss challenges posed to medical personnel providing care for troops operating within the Horn of Africa and the East African region at Camp Lemonnier, Djibouti, Nov. 14 to 16, 2017.

Medical personnel from the U.S. Army, Navy and Air Force, assigned to both Camp Lemonnier and the Combined Joint Task Force - Horn of Africa (CJTF-HOA) Surgeon Cell, along with medical professionals from Djibouti and the German Army, collaborated with the Navy Medicine Professional Development Center (NMPDC) to share their knowledge and experience gained from their work in Africa and around the world during a three-day Military Tropical Medicine (MTM) course.

The MTM course was designed to educate and train physicians, nurses, medics, veterinarians and all other allied health professionals on a wide range of tropical medicine topics, including diag-

nostic and treatment measures for many of the infectious and communicable diseases common to the area. This could include malaria, hemorrhagic fevers, diarrheal diseases, vector-borne infections, HIV/AIDS, and tropical dermatology issues.

Ensuring medical providers within these regions have the proper knowledge and skillset to address all location-specific issues that may arise is an extremely important task, said U.S. Air Force Capt. Marilou Mote, Environmental Health Officer in the CJTF-HOA Surgeon Cell. "Knowing the risks can help them determine between illnesses that present the same, like the flu versus malaria."

As the most valuable asset of the military, members must be fit and healthy to perform in an ever-broadening scope of tasks in any location, each with its own set of challenges.

"The world is becoming more interconnected, in that our militaries are participating in more humanitarian, disaster relief and crisis-response missions," said U.S. Navy Lt. Cmdr. Nehkonti Adams, Director of Military Tropical Medicine at the NMPDC. "Preparing



(U.S. Air National Guard photo by Staff Sgt. Allyson L. Manners)

Medical professionals from across the U.S. military services, foreign militaries and local community pose for a group photo during the Military Tropical Medicine Course at Camp Lemonnier, Djibouti, Nov. 16, 2017.

our practitioners in cases of tropical medicine is essential to mission success. The program must involve providers across the services, and foreign militaries as well as civilian collaborators to succeed."

The MTM course is given every six months at Camp Lemonnier, and medi-

cal professionals from all backgrounds and locations who share an interest or experience in tropical medicine are encouraged to apply. For more information on the course content please visit: <https://www.med.navy.mil/sites/nmpdc/courses/Pages/Military%20Tropical%20Medicine.aspx>

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• Soldier (Continued from front page)

Hospital. And with more than 11 years in the Ohio National Guard, Crabtree has a vast amount of real-world experience, which helped prepare him for the relief mission in Puerto Rico.

In 2009, he deployed to Iraq for one year as a line medic for Troop B, 2nd Squadron, 107th Cavalry Regiment. Because of his role as a line medic, at just age 24, he was responsible for 30 cavalry scouts (some just 18 and 19 years old) who were running missions six days a week.

"I was their only medical asset," Crabtree said. "I was responsible for knowing their medications, knowing their allergies and providing day-to-day care while we were out."

Crabtree answered the call to duty again in 2012, when he deployed to Afghanistan on an Operational Mentor and Liaison Team (OMLT) rotation that provided medical training to Hungarians. Those Hungarians would then train Afghan soldiers in medical tasks and procedures.

Between these two missions, his military medical skills were enhanced while attending Wright State University, where he graduated with a bachelor's degree in nursing in 2011.

Fast forward to 2017, when Puerto Rico was hit by Hurricanes Irma and Maria. Crabtree volunteered to deploy with the 285th Medical Company (Area Support), yet again, answering the nation's call for help. In addition to his medical duties at the Federal Medical Stations in Ponce and Manati, Crabtree, now 33, also was responsible for the scheduling and organization of a 28-Soldier platoon capable of treating between two dozen and 200 patients in one day.

In Puerto Rico, he was accountable for every piece of equipment brought by the 285th that was used to treat patients. He also acted as a trusted resource, often instructing other medics in their skills and application.

"He leads by example. He shows us what he wants instead of just telling us what he wants us to do," said Spc. Joel Schmelzer, a fellow medic with the unit. " Sergeants are always supposed to put their Soldiers first, but he really lives up that motto."

Schmelzer and his fellow Soldiers are equally impressed by Crabtree's talent with children as they are by his leadership skills.

"I finally got to see him work with kids the other day and he was absolutely fantastic," said Sgt. First Class Dustin Hartman, the acting first sergeant of the 285th. "Not only did he have little tricks and things to make the kids cooperate, you could see he genuinely cares about children."

Crabtree had the opportunity to treat children on several different outreach missions in the mountains surrounding Ponce. On these types

of missions, medical professionals would bring supplies and provide medical assessments to citizens who could not travel to hospitals.

"I loved that, (the outreach missions)," Crabtree said. "The biggest struggle for me is I don't always get to be the medic in the room working on patients all the time. That's why I joined (the Army), to be the medic that got to treat people. So, to be out on those missions was like when I first joined. I felt like a line medic again."

Whether he is a medic in the mountains of Puerto Rico or a nurse in the emergency room back home in Dayton, Crabtree is an example to others. One health care specialist in his platoon, Spc. Will Mauntler, is a firefighter-EMT in his civilian life and has delivered patients to Crabtree's emergency room.

"I've seen him interact with his civilian employees and you can really tell that he does a fantastic job leading them," Mauntler said. "I wish there were more Staff Sgt. Crabtrees."

Crabtree is able to focus on the mission because of the unwavering support of his Family, specifically his wife Kaitlyn, who is a counselor at Kettering Medical Center and volunteers with the 285th Medical Company Family Readiness Group, and his 16-month old daughter, Margo.

"I can't imagine how hard it is for my wife at home. I couldn't do what she's doing," Crabtree said. "She's very proud of me. She sends texts about that all the time."

Crabtree's life is a successful integration of his civilian and military responsibilities. He embodies all of the organizational values of the Ohio National Guard, especially Service, Integrity, Reliability, Teamwork and Inclusion.

"Staff Sgt. Crabtree is an outstanding leader," said Spc. Tarrah Berg, a Soldier in his platoon. "After completing paramedic school, he helped me get a job at Dayton Children's Hospital. He goes above and beyond in his duties and is a great mentor to our junior-enlisted individuals."

Added Hartman: "He embodies the Army values, which contributes to him as a person outside of the military. He lives those values in and out of uniform."

Whether his uniform is camouflage pattern or hospital scrubs, Crabtree's medical proficiency and dedication to helping others is apparent. During the 285th's time serving in Puerto Rico, Crabtree and more than 50 other health care professionals from the unit were able to treat more than 2,000 patients. Not only parents, but all citizens needing treatment could rest assured that they were in capable hands with Staff Sgt. Crabtree and the men and women of the 285th.

• Care Week (Continued from front page)

Air Force Thunderbirds pilot, who spoke about the dedication the program has given to her and her family as she healed from her wounds after a tick bite led to a traumatic brain injury.

"I honestly believe that the support and compassion and the work that the wounded warrior program has done on behalf of my family and myself has improved the rate of my recovery," said Malachowski. "Our wounded warrior program is a testament to the power of continued teamwork and to what it means to be a wingman."

CARE week ultimately gave a place for wounded warriors to break down barriers and gave them a sense of belonging, said Gonzales.

"When we bring [warriors] together they learn they are not alone and pull together as a team," Gonzales said. "This creates a sense of family that continues well after they leave the event. At the end of the day, the Air Force is working hard to take care of their own."

It is because of this effort to help wounded warriors that the program is providing individuals the tools they need to recover. The bonds created and healing accomplished has gone as far as to impact people in the best way.

"This program saved my life," Rosario said. "Programs like AFW2 are saving lives."

To learn more about the AFW2 Program, visit: WEBSITE

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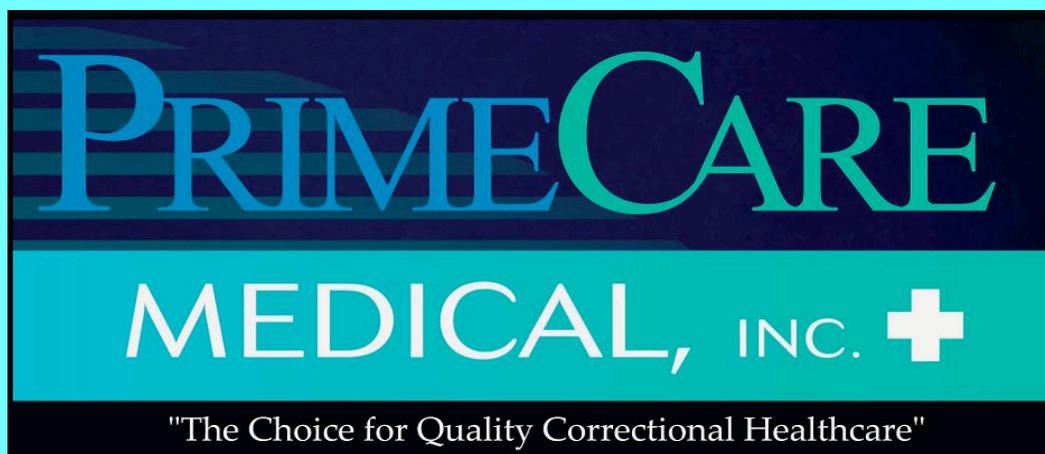
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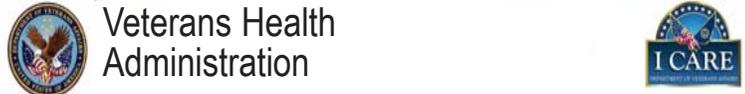
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- Home Care Service Nurse Classification: 40229
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- Home Care Service Nurse Manager Classification: 40235
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•Bachelor's degree from an accredited college or university in Nursing •Five years of professional nursing experience including three years of administering, managing, or supervising a home care program or multiple-site home care offices Or •Bachelor's degree from an accredited college or university in Nursing •Six years of professional nursing experience including three years of administering, managing, or supervising a home care program or multiple-site home care offices.

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EOE

Christmas In The Field



World War I

Vietnam War

Innovative PT program increases readiness downrange

By Tech. Sgt. Louis Vega
386th Air Expeditionary Wing

An innovative system is being used to help Airmen remain mission ready and physically capable, allowing them to be more productive in their duties downrange.

With the help of a colleague, Capt. Eric Walter, 386th Expeditionary Medical Group physical therapy element chief, has developed a proactive approach to physical therapy at an undisclosed location in Southwest Asia.

“We embed into a unit for a set number of weeks,” said Walter. “We bring out two tables and all our gear, treating patients as if they had come to the clinic.”

While Walter evaluates and re-evaluates, his only assistant, Staff Sgt. David Dillow, 386th EMDG PT technician, thoroughly executes the plan of care.

“We try to help patients with injuries obtained from the AOR [Area of Responsibility],” said Dillow. “But we don’t turn people away who have had past injuries. We know past injuries can flare up and affect job-related duties.”

The program is intended to reach out and visit units performing heavy labor jobs with an inability to get to the medical clinic as well as frequent patients of the clinic.

This system is designed to positively impact as many people as possible in a short amount of time. There is much less time wasted going through the appointment process in the clinic. Another benefit is that it increases unit morale knowing that the PT team is thinking about their unit.

The teams’ overall goal is to see less people every week.

“We want to be a jumpstart and provide coaching for each patient and give them tools to become more fit-to-fight Airmen,” expressed Walter.

This is the first and only PT deployed embedded program, and it started here in August with a pilot unit.

“On the first day we evaluated 21 patients and on the final day after seven weeks of embedment, we only saw four with no returning patients,” Walter said. “We ask each person we see to follow-up with us the following week if things get better. We keep track of everything we did the week

before to provide high quality care.”

Walter also stated that the success of the program so far has been enormous.

“We work around a mission,” said Senior Airman Calvin Lourens, 386th Expeditionary Logistics Readiness Squadron passenger service specialist. “When they come down here it makes it easier for us. After they visit I feel refreshed and more comfort. I am able to take what they teach me and work with it.”

Lourens suffers from pain in his shoulder and was treated by Walter and given exercises to strengthen specific muscles by Dillow. This was his second visit with the PT team.

Walter has received feedback from the units and their commander’s highlighting the benefit of the program. He has tracked less units coming into the clinic for therapy after embedding into the unit. The plan going forward is to utilize the system for upcoming rotations to help ensure Airmen are mission ready.

“I thank God for the opportunity to serve the men and women who are so close to the mission,” said Walter. “It’s an honor to serve alongside Staff Sgt. Dillow, who I wouldn’t be able to do this without. Finally, it is a blessing to be able to help rehab and strengthen the world’s greatest Air Force.”

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Bronson Healthcare Group is located just east of Lake Michigan and 150 miles from the Chicago area offering a diverse cultural opportunity, very affordable real estate, a major focus on education, and a variety of recreation options. Our local area is home to several international companies including Stryker, Pharmacia, and Kellogg, along with Western Michigan University School of Medicine and residency program. Interested candidates may contact:

Cadace Lee: leeca@bronsonhg.org
 Phone#269-341-8631

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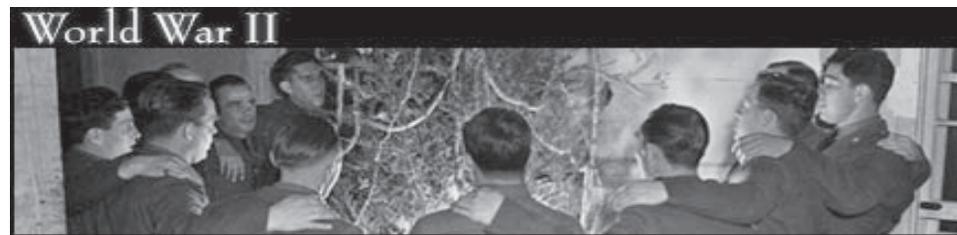
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The Cardiovascular Division is an 18-member group that includes general cardiologists as well as specialists in electrophysiology, coronary and peripheral interventions, vascular medicine, heart failure, pulmonary hypertension, cardiac rehabilitation, congenital heart disease, and basic research. An expertise in autonomic dysfunction draws worldwide referrals.

The University of Toledo Medical Center maintains a fertile environment for career advancement. Dramatic near-term growth is anticipated as the University forms a major academic affiliation with the region's Promedica Health Care System. Professional development in the disciplines of patient care, teaching, and research is strongly supported. Our physicians benefit from competitive salaries and a generous benefit package.

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The Cardiovascular Division is an 18-member group that includes general cardiologists as well as specialists in electrophysiology, coronary and peripheral interventions, vascular medicine, heart failure, pulmonary hypertension, cardiac rehabilitation, congenital heart disease, and basic research. An expertise in autonomic dysfunction draws worldwide referrals.

The University of Toledo Medical Center maintains a fertile environment for career advancement. Dramatic near-term growth is anticipated as the University forms a major academic affiliation with the region's Promedica Health Care System. Professional development in the disciplines of patient care, teaching, and research is strongly supported. Our physicians benefit from competitive salaries and a generous benefit package.

Toledo is Ohio's fourth largest city with a metro area population of 600,000. It provides important small town advantages such as convenience and a low cost of living. At the same time it boasts a fantastic zoo, world-class art museum, excellent symphony, and minor league sports. The Maumee River and Lake Erie provide ample water sports. Schools are excellent and diverse. Contact:

Stephenie Moench,
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COLLEGE OF MEDICINE
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THE UNIVERSITY OF TOLEDO

Heart Failure Cardiologist Position

The Cardiovascular Division of The University of Toledo Medical Center, Toledo, Ohio has an opening available for a fellowship-trained Heart Failure specialist. Candidates should be BC/BE, with strong interests in clinical care and teaching.

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NMCP celebrates Native American Heritage Month

By Petty Officer 1st Class Laura Myers
Naval Medical Center Portsmouth

Naval Medical Center Portsmouth's Diversity Committee celebrated Native American Heritage Month Nov. 29 with a ceremony that included a guest speaker from the Meherrin Indian tribe of North Carolina and a display of the tribe's arts and crafts. During the ceremony's invocation, Lt. Cmdr. Devon Foster, NMCP staff chaplain, said that "From the Revolutionary War to this day, Native American Indians continue to share their unique talent and resilience as they gallantly serve our Nation's Armed Forces.

We are privileged to hear and to learn about who we are and how we got here as Americans. This month's celebration acknowledged the important contributions of native people, and their impact on our way of life today."

The event's guest speaker, Pastor Michael Reid, spoke about the history of the Meherrin Indian tribe, from the meaning of their name to how they got to present day in North Carolina and Virginia. Reid said Meherrin means "People of the Water."

"It means people of the muddy waters because our ancestors traveled along the inlets of the rivers where they would have the deer and all the animals," Reid said. "They were able to raise crops because of all the water that was there."

Reid shared many aspects of their history, including their interactions with the colonists hundreds of years ago. As the colonists began to arrive, he said, the tribe taught them how to grow food.

"They hadn't raised any food, so our tribe started teaching them, which of course helped them survive and helped us survive," Reid said. "As we became more friendly, Thanksgiving Day happened. Our ancestors provided a lot of food for the Europeans, and they provided also. We came together in peace, thankful to God for the provisions that were there, and for the friendship and love." Today, the tribe works to help educate children about their ways.

"At our small reservation, we have a pow wow every year to educate our children in the area," Reid said. "We have a school day, a children's day, and thousands of children come out and they are so eager to learn our culture. We also share different tribal arts and crafts with other tribes in Virginia and North Carolina during the annual pow wow."

Reid shared some of his crafts with those who attended NMCP's ceremony and talked about the arts and crafts that his tribe designs and shares with the other tribes.

Reid served in the Air Force in the 1950s and 1960s and also spoke about the challenges of the past that the Meherrin tribes faced and about the



(U.S. Navy photo by Mass Communication Specialist 2nd Class Kris R. Lindstrom)

Pastor William M. Reid, a member of the Meherrin Indian tribe of North Carolina, left, and Capt. Laurence Kuhn, acting commanding officer, right, with members of the Diversity Committee before the cake cutting that concluded Naval Medical Center Portsmouth's (NMCP) Native American Heritage Month celebration. NMCP's Diversity Committee hosts the annual Native American Heritage Month celebration to honor the history and culture of Native Americans nationwide.

current challenges they face. He concluded with thanking the service members at the ceremony for their service to this country.

NMCP's Diversity Committee celebrates different heritages and cultural observances throughout the year. Hospitalman Billy Vaughn, who was the master of ceremony for the celebration, said this was a great opportunity for the command to learn about Native Americans and their history.

"It's a great opportunity to learn about the Native Americans, from their culture and accomplishments to their service in the military," Vaughn said. "This means a lot to me since there aren't that many reservations in the area. So this gives them some exposure to their community here."

The Diversity Committee's secretary, HM2 Diana Torres, said that the committee's celebrations not only affect her, they affect the command.

"I am part of the Diversity Committee because I want to do something that makes a difference," Torres said. "I want to be involved with a committee that is into a lot of different things that help bring us together because, to me, that is important. Events like this make me feel like I'm doing something not only for myself, but I'm doing something for everybody else to help educate them."



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