



The Heartbeat

Published monthly for the staff and patients of
General Leonard Wood Army Community Hospital

March 2008



Exercise, exercise, exercise

Sergeant 1st Class Rodney Shoy (far left), Staff Sgt. Sharif Hall (center), both from the General Leonard Wood Army Community Hospital emergency room, and Maryann Sawyer, OB/GYN clinic nurse, treat a "casualty" injured in a mass casualty exercise March 26. GLWACH staff members treated more than 40 "casualties" during the day-long exercise. Congratulations to all on a job well done. (Photo by Carl Norman)

Proximity locks start May 1

System adds security,
reduces number of
available entrances

By Carl Norman
GLWACH Marketing

Looking to enhance security for patients, visitors and staff, General Leonard Wood Army Community Hospital is incorporating a proximity lock system on all exterior doors May 1.

The proximity lock system will help reduce risks associated with access to the hospital and will bring GLWACH up to standards with other military treatment facilities and civilian health care facilities across the nation.

"In this day and age of increasing numbers of violent crimes, we can't afford to be lax about security and controlling physical access to our facility," said Col. Theresa Sullivan, GLWACH commander.

The new system will reduce the number of

See LOCKS Page 6

Skelton visits WTU

By Carl Norman
GLWACH Marketing

The House Armed Services Committee Chairman visited the Warrior Transition Unit here March 19, seeing first-hand how General Leonard Wood Army Community Hospital provides health care for America's wounded warriors.

Rep. Ike Skelton (D-MO) took in briefings on streamlined WTU policies and procedures that put top-quality and timely health care No. 1 priority for a wounded Soldier population that's grown by nearly 2,000 percent since June 2007.

Providing command and control, primary care and case management for Warriors in Transition, establishing conditions for their healing, and promoting their return to the force or transition to community service is the WTU's main mission. Warriors in Transition, commonly referred to as WTs, are military members who have complex medical needs requiring six months or more of treatment or rehabilitation. These service members can be serving in Iraq, Afghanistan or at home station.

See SKELTON, Page 7

Hello GLWACH. In our day-to-day lives, we sometimes don't have or take the time to laugh enough. Laughter is good medicine for everyone. With that said, here are some items to help you laugh a little.

◆ Ways to keep a healthy level of insanity in the workplace:

1. Page yourself over the intercom. (Don't disguise your voice.)
2. Find out where your boss shops and buy exactly the same outfits. Always wear them one day after your boss does. (This is especially effective if your boss is a different gender than you are.)

3. While sitting at your desk, soak your fingers in "Palmolive."

4. Put up mosquito netting around your cubicle.

5. Every time someone asks you to do something, ask them if they want fries with that.

6. Put your garbage can on your desk. Label it "IN."

7. Determine how many cups of coffee are "too many."

8. Put decaf in the coffeemaker for 3 weeks. Once everyone has gotten over their caffeine addictions, switch to espresso.

9. In the memo field of all your checks, write "for sexual favors."

10. If you have a glass eye, tap on it occasionally with your pen while talking to others.

11. When driving colleagues around, insist on keeping your car windshield



Laugh a little

wipers running in all weather conditions "to keep 'em tuned up."

12. Reply to everything someone says with "that's what YOU think?"

13. While making presentations, occasionally bob your head like a Parakeet.

14. Sit in the parking lot at lunchtime pointing a hair dryer at passing cars to see if they slow down.

15. Ask your co-workers mysterious questions and then scribble their answers in a notebook. Mutter something about "psychological profiles."

Joking around:

◆ What do you call a man who claps his hands at Christmas time? Answer: Santapplause

◆ Where do snowmen dance? Answer: At a snowball

◆ If you have a fear of Santa Claus

coming down your chimney at Christmas, are you suffering from Santaclaustrophobia?

◆ Two policemen are called to the scene of a crime in a convenience store. One asks the manager what happened.

He replies, "There's a man over there covered in Corn Flakes and he's dead."

"That's odd," said the first policeman, "didn't we have one covered in Bran Flakes yesterday? And another covered in Wheat Flakes last week?"

"Your right" said the second policeman. "This is the work of a cereal killer."

◆ A man goes to his physician and says, "Doctor, doctor,

Every time I stand up quickly, I see Mickey Mouse, Donald Duck and Goofy."

The doctor asks, "Ok, how long have you been having these Disney spells?"

◆ Why did the airline pilot go to see a psychiatrist? Answer: He thought that he was plane crazy.

◆ A famous soccer player parked his brand new Porsche outside a gift store and went inside to shop.

About ten minutes later a blonde salesgirl ran up to him shouting, "I just saw someone steal your sports car."

"Did you try to stop him?" asked the soccer player.

"No," said the blonde. "I did better than that, I got the registration number of the car!"

◆ What do angry mice send at Christmas? Answer: Cross mouse cards.

The Heartbeat

The Heartbeat is an authorized publication for members of the Department of Defense, and staff and patients of General Leonard Wood Army Community Hospital.

Contents of The Heartbeat are not necessarily the official view of, or endorsed by, the U.S. Government or the Department of the Army. The editorial content of this publication is the responsibility of the GLWACH Public Affairs Officer. Everything published in The Heartbeat is done so without regard to individual race, color, religion, sex, national origin, age, marital status, physical handicap, political affiliation, or any other non-merit factor. The deadline for submissions is the 15th of the month prior to publication. Send submissions to Carl.Norman@amedd.army.mil.

Command Sergeant Major: Command Sgt. Maj. Antonio Milton
Deputy Commander for Administration: Lt. Col. Thomas Bundt
Deputy Commander for Nursing/Hospital Services: Col. Tempie Jones
Deputy Commander for Clinical Services: Lt. Col. John Lowery
Editorial staff: Public Affairs Officer/Editor: Carl Norman

Command Team:
Commander: Col. Theresa Sullivan

Nutrition: It's a matter of fact

By Capt. Jill Fowler-Hakes
Nutrition Care Division

Due to marketing ploys, media hype, celebrity testimonials and fictitious science, it's never simple to determine fact versus fiction when it comes to nutrition.

The weight loss market is probably the biggest scandal when it comes to truth versus reality. So how does one decipher fact from fiction? Here are some helpful tips to consider before wasting all of your next paycheck on the latest fad diet or miracle pill.

FACT: Detox diets can be harmful

Toxins are normal and healthy. The liver, kidney, gastrointestinal tract and respiratory system work together to detoxify the body every day, eliminating the need for pills, colonic cleansing and special juices.

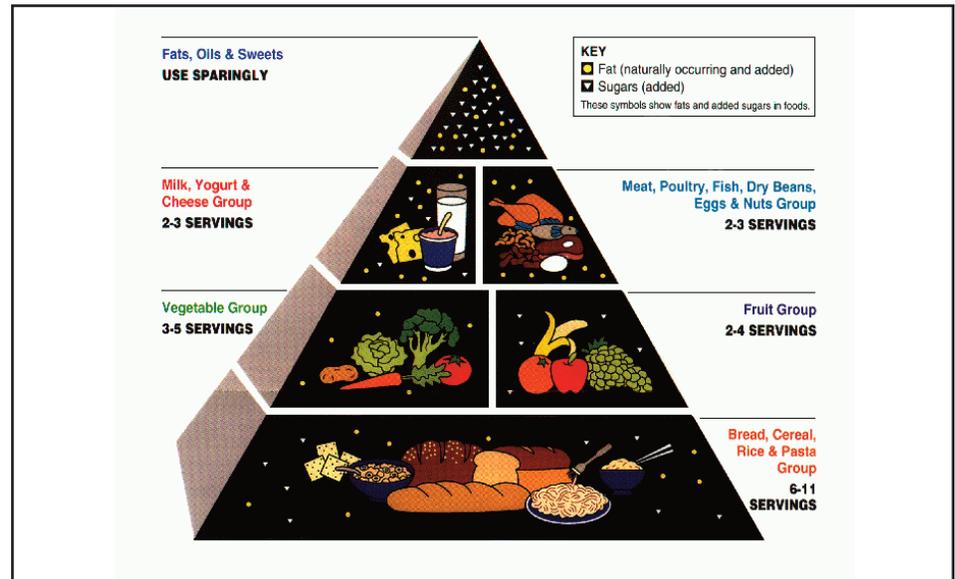
For example, many cleansing products contain laxatives that can be habit forming and permanently change the GI tract's normal function with overuse. Some colonics can cause bowel perforation, which can lead to infection and serious illness. They may also flush out normal beneficial bacteria in the GI tract and cause dehydration.

Fasting can cause headaches, fatigue, ketosis and could land a diabetic in the hospital. Not eating can cause low blood sugar, which can cause confusion, decreased mental alertness, shakiness and fatigue. I don't know about you, but I wouldn't want to be on the road with someone like that!

FICTION: Raw food is better for you.

Eating only raw foods is not needed and would get awfully boring. Sweet potatoes, fish and dried beans have all been shown to be excellent for health, but would require elimination since they are edible only cooked.

Also, some nutrients in foods are enhanced when the food is cooked. For example, Lycopene has greater bioavailability in cooked tomatoes. Fi-



nally, one never wants to consume unpasteurized juices and milks due to the risk of food borne illnesses.

FACT: Natural does not always mean safe.

Under current law, herbal supplements don't require FDA regulation like food and prescription drugs do. Many lab studies on herbal medications show that the amount contained in the package is not consistent with what the label states.

Many herbs are potent, have side effects and can interact with medications. For example, many of them can cause excess blood thinning in large doses, act as diuretics or even raise blood pressure.

I am not saying all herbs are bad, but one must consider other medications they are taking. Poisonous berries are natural, but are they safe?

FICTION: We should eat high protein diets.

It's a fact; 3,500 calories equals one pound of fat. It doesn't matter if the calories come from protein, carbohydrate or fat.

When people take in too many calories, they gain weight. If they get more protein than they need, the extra calories can be stored as fat.

To lose weight, people must take in fewer calories than they burn. The

easiest way to lose weight is to create a 500 calorie deficit each day by reducing the amount of calories taken in and increasing physical activity.

For some people, cutting out sodas and juices may decrease calorie intake enough to lose weight. Replacing high calorie drinks, snacks, desserts and fast foods is a change that can help improve weight and increase overall health.

FACT: No one solution fits everyone.

To find out about an individual weight management plan, contact a registered dietitian at General Leonard Wood Army Community Hospital. What is a registered dietitian some may ask?

RDs, as they're commonly referred to, are health care professionals who hold a four-year undergraduate degree in an approved dietetics program. RDs must also complete credentialed internship, pass a national registration exam and earn lifelong continuing education units to maintain registration status.

Dietitians are the most credible source of nutrition information because the information given is backed by evidenced based food and nutrition research.

For more information, call (573) 596-1762.

GLWACH outlines release policies

General Leonard Wood Army Community Hospital's Release of Medical Information section is located in Room 161 on the first floor. Its hours are 7:30 a.m. – 4:30 p.m., Monday – Friday. It is closed Saturday, Sunday and all federal holidays.

As the name implies, the Release of Medical Information section is responsible for releasing copies of medical information. The section serves nearly all active duty military family members on Fort Leonard Wood, retirees and their family members plus the civilian workforce whether they live on post or in the surrounding communities.

What the section does:

- ◆ Copy medical records for service members leaving the military due to ETS, retirement and other discharge types.

- ◆ Copy records for family members when their sponsor leaves the military and they are no longer eligible for care within the military system; also dependent children when they are no longer eligible for care.

- ◆ Request past medical history from the civilian health sector for service members and their families; this includes not only medical records and mental health records, but mammogram and other radiology films as well.

- ◆ Process requests for records copies for VA claims, disability, vocational rehabilitation, attorneys, law enforcement and other legal entities and requests from outside civilian and military facilities.

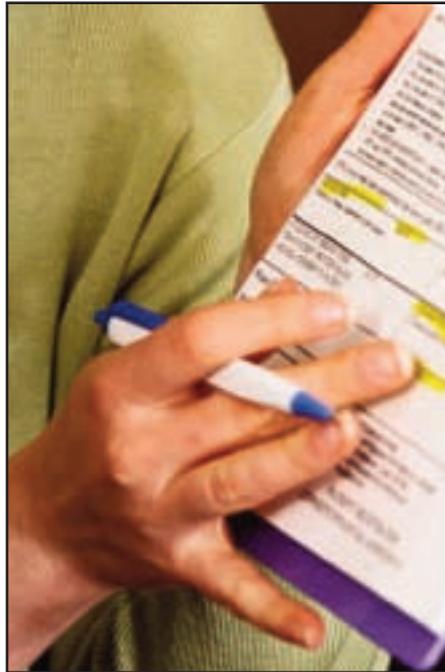
- ◆ Process requests for records when a patient is referred to an out-of-facility specialty provider.

- ◆ Copy records for Medicare-eligible patients who are no longer provided primary care within our facility.

- ◆ Provide personal copies of lab and radiology reports and fax reports to requesting providers.

- ◆ Answer questions on medical records and refer patients and family members to the appropriate office if unable to assist.

- ◆ Provide copies of children's physi-



cal and shot records for school, day care and sports activities.

- ◆ Release medical information needed to process insurance applications and claims.

- ◆ Copy visits for Line-of-Duty Investigations

It's estimated that our office serves a total beneficiary population of more than 36,000 and this figure does not include the numbers of out of facility physicians, clinics and hospitals that the staff supports.

"We often receive huge volumes of requests for copies of records on a daily basis," said Capt. Sara Wilson, Patient Administration Division chief. "So, it's impossible to expect that we can accommodate each person's request for copies on the spot."

With that in mind, here are some questions and answers that will help people get the very best service the Release of Medical Information staff can provide:

1. How do I change my Primary Care Manager?

This office cannot effect any permanent change in beneficiaries' PCM. This is done via the Patient Representative Office.

2. Why is my medical record folder so thin? I have had multiple visits here; are my records lost?

No, please understand that your records are not lost. In late 2004, this facility began using an electronic medical record and most clinics here no longer provide a hard copy of your visit to place in your folder. If you have a very extensive medical history, your records may be split into more than one volume; the most current volume is still kept in the Outpatient Records area and earlier volumes are stored in a separate area in the basement. As long as you receive consistent care within this facility, your records will always stay here. If there is a three-year break in care, your volumes will be retired to the National Personnel Records Center in St Louis. We do not maintain a hard copy medical record for Soldiers after they ETS or are otherwise discharged. If information is not contained within the electronic medical record, we cannot re-generate documentation of those clinic visits, although laboratory and radiology reports (from 1996 – date) may still be available. The Electronic Record (known as AHLTA) is accessible through any military health care facility, world-wide and service wide. If you are traveling and need to report to a military base for emergent health care, your past medical history is now available instantly for review and effective treatment. Some items are not input into the electronic medical record. These may include: Physical examinations, EKG, pulmonary function tests, Holter Monitor profiles, emergency room visits, Med-Pros Data, or TRICARE authorizations,

3. I have had care in the civilian sector and my doctor needs to review these records. How can I get these records here?

You will need to come to our office during normal business hours and request to mail/fax your former provider. We will need the providers name or clinic/hospital name, the location and a contact telephone number. We genere

See RELEASE, Page 5

RELEASE, from Page 4

ally request only extracts of records needed for your care here; not entire medical care history as these records are often too extensive or no longer available for transfer. Please remember, we cannot guarantee that these providers will honor our faxed release or that records will be faxed back immediately when requested. All records received will then be forwarded to your outpatient records folder. Please ensure that the information you give us is accurate since we are not privy to the locations and dates of your prior medical history. This includes any former (maiden) names that the records might have been filed under.

4. I had laboratory or radiology tests performed; how can I get the results? What about results for my spouse/children?

We field many telephone calls each day regarding these requests. Please remember that this office is not credentialed to release test results via telephone or e-mail. With the increase in identity theft, which is now finding its way into the health care system, we must be especially vigilant in disclosing any information which uses a Social Security number as a patient identifier. We are unable to verify your identity via telephone or e-mail and certainly you would not want your personal security put at risk by having your protected health information disclosed to someone not authorized to have it. If you need an immediate result, you must contact the clinic; only your primary care provider or his/her nurse can give you test re-

sults over the telephone. If you come to our office, we will be happy to print out those results and give them to you directly. Because of HIPAA privacy regulations, we cannot give you any information regarding your spouse or adult children (over age 18, generally, or under other special circumstances) without their written permission. General Powers of Attorney issued by legal assistance are not valid unless they specifically state that you have been granted access to another person's medical information. Durable Powers of Attorney do not meet the legal guidelines either as they are generally not valid unless the patient has been judged to be unable to make medical decisions on their own nor does the presentation of that person's ID Card. Federal regulations regarding health information privacy are very strict and we cannot circumvent them.

5. I want a copy of my medical records. Why does it take so long to get them?

Our office staff consists of two people and we service nearly all of the beneficiaries assigned to our catchments area. Our main priority is always the active duty service member and especially those Soldiers assigned to our Warrior Transition Unit. From there, we prioritize all other requests according to the date received and the urgency of the requests. Of necessity, requests for records for a patient in an emergency situation or a specialty referral are given a higher priority. We are generally able to fulfill routine requests within 2-3

For more
information, call
(573) 596-0498

weeks, although in some cases the wait may be shorter or longer depending on the number of volumes and the information needed. By regulation, we can only provide one full copy of your records and we do not charge for this copy unless it is going to an insurance company or an attorney. Most civilian facilities charge for this service. Just like in the civilian health sector, federal law mandates that the original medical record remain the property of the treating facility; the information contained in the record belongs to the patient and we will provide copies as needed with the proper authorization. If the record is taken from this facility and lost or damaged, we may not be able to reconstruct your medical history. It is for our patients' protection that we generally do not release the original medical record to be carried from one facility to another. Please remember that we do not certify copies of records for VA or other personal use. Certification is only done in response to attorney requests for court purposes or in response to a subpoena.

6. I am filing for an increase in my VA/Social Security disability. Why can't I just pick up my outpatient records?

As before, most medical visits are now in our Electronic Medical Record and are not contained in your

hard copy folder; thus your outpatient record is not a complete medical history. When you are filing for VA disability, either an initial claim or for an upgrade, your job is to tell the VA office what you are filing your claim on, the time frame of treatment and the places you were treated. For the most expedient adjudication, the VA Regional Office needs the medical documentation sent directly from the treating facility. If the claimant submits their own medical records and they are not sufficient to substantiate the claim, the VA will also request records and will compare the two submissions — page by page. Not only is this a duplication of copying work for us, but it also could mean that your adjudication will be delayed as the two sets of records are compared. The same applies for Social Security disability. Contrary to what most "help" sites tell you, the most expedient method for processing your claim involves having the medical facility send your records to the adjudicating office for you.

7. I need my mental health records copied for a claim. Why do I have to wait so long to get them?

Many people do not realize that the outpatient medical record doesn't include visits in the Behavioral Medicine Division. These requests must be made in writing and require the patient's provider to approve our release of this information. These requests can take several weeks to process.

For more information, call (573) 596-0498.

Survey shows need for PC security

A recent National Security Institute survey indicated that many federal workers continue to violate information security policies despite being aware of threats to agency systems and knowing the importance of following data security policies.

The good news, experts say, is that government workers and their leadership understand the importance of information security. The bad news is that workers seem to lack an understanding of the critical role they play in protecting information assets.

The report found that although 80 percent of government workers believe federal information systems face significant threats and that information security is important, those workers continue to violate policies.

Among federal workers, 22 percent said they believe their co-workers follow information security policies and procedures half the time or less. About 58 percent said they stick to them very frequently, and only 20 percent said their co-workers adhere to them all the time.

Additionally, the majority of

government workers are not held accountable for understanding information security policies and procedures.

According to the survey, only 36 percent of government workers are held accountable for knowing information security policies and procedures via their annual performance evaluations. Although 97 percent of the participants said they were required to take information security training, only one-third said they remembered most of the material.

Analysts studying the survey results said there seems to be a significant lack of understanding by government workers that each individual plays a key role in protecting information assets. Cyberattackers now use more sophisticated and stealthier techniques to exploit user trust, such as phishing, a technique to fool online users into divulging sensitive information.

With the appropriate focus on security awareness and accountability, workers will do a better job of protecting government information and systems.

8 Steps

To Improving PC Security

1. Know the threat. The online world is a dangerous place. Just as in any city or town, there are good neighborhoods and bad ones; know which is which!

2. Use the tools. Every home user should install commonly available security tools such as anti-virus software, anti-spyware software, and a personal firewall.

3. Be smart online. Like the physical world, cyberspace has its con-artist side, typified by bogus e-mails advertising get-rich-quick schemes, can't-miss stocks, and other come-ons.

4. Never respond to unsolicited requests for personal information. Be wary of e-mails from organizations or individuals asking for your personal information. Always ask or look for contact information on unsolicited requests —

and be skeptical!

5. Beware of phishing e-mails. Phishers are constantly devising new attacks, so you must always be vigilant.

6. Don't use personal information for passwords. Using information such as Social Security numbers, birth dates, names, e-mail addresses, or telephone numbers as passwords can make you an easy target.

7. Review online privacy and security policies. Reputable companies post a privacy and security policy or statement on their websites. This should tell you what information the company collects, how it is used, and what is shared.

8. Monitor online activity regularly. If you conduct business online, review your account statements regularly to detect a theft and limit its damage.

LOCKS, from Page 1

entrances visitors and vendors can access during duty hours. The open entrances will be:

- ◆ The southwest entrance by the VA Clinic on the ground floor.
- ◆ The northwest entrance by the Red Eagle Clinic on the first floor.
- ◆ The main (west) entrance on the first floor.
- ◆ And the emergency room (east) entrance on the first floor.

"All other exterior doors will be locked at all times and not accessible, except to GLWACH staff," said Maj. Margaret Toillion, GLWACH's logistics division chief. "People can exit any door they choose, once inside the facility."

When visiting the hospital after duty hours, patients and vendors can only enter through the main (west) and emergency room (east) entrances on

the first floor, Toillion said.

The VA and Red Eagle Clinic entrances will be locked at 5 p.m. every duty day and will reopen at 7 a.m. the next duty day.

"We're not trying to make things more difficult, we're trying to make things more secure," Sullivan said. "Our goal is to be the premier health care facility in our area, and enhancing security is a step in that journey."

SKELTON, from Page 1

"We stood up the WTU June 15, 2007, with a small staff caring for five wounded Soldiers," said Col. Theresa Sullivan, GLWACH commander. "During the past year, we've journeyed to a more structured and efficient health care process that has four platoon sergeants, 10 squad leaders and 23 civilian staff members working hand-in-hand with case managers and physicians to care for nearly 120 Warriors in Transition, and that number grows each day."

Sullivan noted that GLWACH's Warrior Transition Unit manages health care needs for wounded Soldiers in Missouri, Iowa, Minnesota and the entire nation of Canada as its primary area of responsibility. However, they also have WTs in Arizona, Texas and Michigan to help facilitate healing in their respective hometowns.

"Our WTs' mission is to heal, our job is to facilitate that and do whatever is necessary to either help them return to duty or transition into a becoming a productive member of their communities," said Capt. Czarvitto Rogers, WTU commander.

Strict access-to-care standards are one tool Rogers and crew use to do just that. Implemented under the Army-wide Medical Action Plan, the access-to-care standards call for urgent care within 24 hours; routine care in three days or less, seven days or less for specialty care and diagnostic tests, and 14 days for medically indicated non-emergency surgeries.

"All our wounded warriors have their initial medical evaluation screening within one work day after arriving at the WTU so we can provide the care they need as soon as possible," Sullivan said.

Another tool the WTU staff uses comes courtesy of the Wounded Warrior Assistance Act that Skelton sponsored in July 2007. This requires a wounded warrior's military and Veterans Affairs case manager to directly handoff records to ensure health care doesn't suffer once they leave



Rep. Ike Skelton (D-MO), left, greets Warriors in Transition Capt. Seth Reimers (center) and 1st Lt. Joseph Bogart during his visit to the Warrior Transition Unit March 19. (Photo by Carl Norman)

military service.

"It's not a 'go over there and make an appointment' type thing any more," Rogers said. "At GLWACH, our case managers make the initial VA appointment for the Soldier and make sure he or she attends that appointment. After that, our case managers follow up with that VA case manager to ensure future appointments are falling in place as they should."

Noting that these are just a couple of instruments the WTU staff uses to manage wounded warriors' health care very successfully, Sullivan encouraged Skelton to get the word straight from the source. Three wounded warriors attended the WTU briefing; Capt. Seth Reimers was one of them.

Reimers received penetrating head and chest wounds in an improvised explosive device attack on his unit in Baghdad, Iraq. He's been assigned to the WTU for the past 10 months.

"I credit the military health care system for saving my life," Reimers told

Skelton and others attending the briefing. "The WTU is not just a shotgun approach to health care. Every Soldier is treated as an individual, and we're not all clumped together. This WTU takes health care down to the Soldier level and I appreciate that more than you know."

After everything was said and done, Skelton thanked each of the Soldiers, shook their hand and said he was proud of them and their service.

In discussing the WTU process, Skelton said, "It's working. I'm extremely proud of the personnel who are carrying it out. The Soldiers that fall within the ranks of this WTU are very fortunate to be here and I compliment the staff and wish the Soldiers well."

Skelton's congressional district is home to Fort Leonard Wood, Whiteman Air Force Base and the Missouri National Guard Training Center. He was instrumental in bringing the Army Engineer School to Fort Leonard Wood and the B-2 Stealth Bomber to Whiteman.

Community Health Resource Center Classes

Below is the General Leonard Wood Army Community Hospital Community Health Resource Center Class Calendar for March-April 2008.

All classes are conducted in the Community Health Resource Center except for breathing techniques which will be held in the MEDDAC Classroom, and others as noted. Those interested can sign up for classes by calling (573) 596-0491. Sign up for tobacco cessation classes by calling 1-866-299-4234, or call the CHRC for more information. Sign up for the Post-deployment Spiritual Wellness class by calling (573) 596-1678.

Classes offered are:

Asthma Awareness: Discuss the causes, signs, symptoms and aggravating factors of asthma. Adults and children, 9 years old and older, who have asthma are encouraged to attend. Class dates are:

◆ April 11, 9 – 11 a.m.

◆ April 25, 9 – 11 a.m.

Breast Cancer Support Group meeting:

◆ April 8, 5 – 6 p.m.

Breastfeeding: Learn how to properly nourish and care for your child while breastfeeding. Class date:

◆ April 16, 9 – 11 a.m.

— Breathing Techniques: Learn techniques to help you breathe more efficiently when in labor. Class dates are:

◆ April 3, 5:30 – 7:30 p.m.

◆ April 10, 5:30 – 7:30 p.m.

◆ April 17, 5:30 – 7:30 p.m.

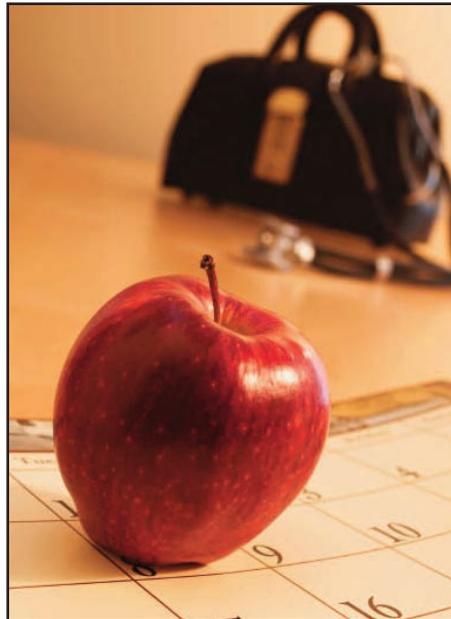
◆ April 24, 5:30 – 7:30 p.m.

Cholesterol Control: Understand the pitfalls of shopping, cooking and eating for a low-cholesterol diet. Cardiovascular disease risk factors such as poor fitness, smoking and obesity are also discussed. Class dates are:

◆ April 14, 1 – 2:30 p.m.

◆ April 28, 1 – 2:30 p.m.

Diabetes Management: Learn about treatment, complications and how to prevent them, exercise, and self-care for diabetes. The dietician will instruct



patients on how to follow a diabetic diet. Class dates are:

◆ April 4, 8 a.m. – noon

◆ April 18, 8 a.m. – noon

Early Pregnancy and Pets in Pregnancy: Learn what to expect in the first six months of your pregnancy as well as how to introduce your pet to your newborn. Class date:

◆ April 7, 2:30 – 4:30 p.m.

Glucometer Education: Patients will be given instructions and a demonstration on how to properly use a Glucometer. Class dates are:

◆ April 3, 9:30 – 11 a.m.

◆ April 4, 1 – 2:30 p.m.

◆ April 9, 2:30 – 4 p.m.

◆ April 10, 9:30 – 11 a.m.

◆ April 16, 2:30 – 4 p.m.

◆ April 17, 9:30 – 11 a.m.

◆ April 18, 1 – 2:30 p.m.

◆ April 23, 2:30 – 4 p.m.

◆ April 24, 9:30 – 11 a.m.

◆ April 30, 2:30 – 4 p.m.

High Blood Pressure/Hypertension: Discuss the causes, treatment and steps taken to beat high blood pressure. Class dates are:

◆ April 8, 9 – 10 a.m.

◆ April 15, 9 – 10 a.m.

◆ April 22, 9 – 10 a.m.

◆ April 29, 9 – 10 a.m.

Infant Care: Parents-to-be learn how to properly bathe and care for their new baby, to include diapering. Class date:

◆ April 9, 9 – 11 a.m.

Infant CPR: New and expectant parents, baby sitters and other care givers learn how to properly resuscitate a baby if its heart should stop beating. Class date:

April 22, 5:30 – 7:30 p.m.

Legal Issues & Pregnancy: Learn about profiles and related issues military members face when pregnant. Class date:

◆ April 11, 1 – 2 p.m.

Nutritious Weigh: Learn about low-fat eating, weight management techniques, cooking methods and dietary trends. Learn how you can lose pounds safely, the importance of exercise and reading food labels, and weight management theories. Class dates are:

◆ April 7, 12:30 – 2 p.m.

◆ April 21, 12:30 – 2 p.m.

Self-Care Intervention Program: Learn how to avoid illness and pursue wellness; learn the importance of healthy habits, how to treat common illness at home, and how to use medications. Participants will receive a pharmacy card to receive non-prescription medication through the pharmacy. Class dates are:

◆ April 2, 1-3 p.m.

◆ April 9, 1 – 3 p.m.

◆ April 16, 1 – 3 p.m.

◆ April 23, 1 – 3 p.m.

◆ April 30, 1 – 3 p.m.

Post-Deployment Spiritual and Emotional Wellness class. Chaplain (Maj.) Eddie Cook, General Leonard Wood Army Community Hospital chaplain, will lead the class which is open to all military beneficiaries, 16 years old and older. Call (573) 596-0491 to register. Class date:

◆ April 24, 9 – 11 a.m. in the General Leonard Wood Army Community Hospital Chapel

Tobacco cessation: Discuss tobacco use, skills to quit and coping strategies to remain tobacco free. Class date:

◆ April 1, 11:30 a.m. – 12:30 p.m.