



The Heartbeat

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

November 2008



Hitting 50

Nick Nichols, Missouri Hospital Association (left) presents Col. Judith Ruiz (right) a plaque commemorating General Leonard Wood Army Community Hospital's 50 years of membership as Lt. Col John Lowery, GLWACH deputy commander for clinical services observes. A not-for-profit membership association, MHA represents every acute care hospital in Missouri as well as most federal and state hospitals and rehabilitation and psychiatric care facilities. In addition to representation and advocacy on behalf of its members, the association offers continuing education programs on current health care topics and seeks to educate the public and the media, as well as legislative representatives, about health care issues. (Photo by Carl Norman)

GLWACH offers flu shots, mist

By Carl Norman
GLWACH Marketing

Eligible TRICARE Prime beneficiaries and government civilian employees working at Fort Leonard Wood can now get "flu shot" or "Flu Mist" immunizations at General Leonard Wood Army Community Hospital.

Although both immunizations are available, hospital officials emphasized that they will strictly follow estab-

lished protocol as to who gets the shots and the mist.

The Centers for Disease Control and Prevention recommends Flu Mist for healthy people 2-49 years who do not have a history of recurrent wheezing and are not pregnant.

Those who should not get the nasal-spray include:

Children less than 2 years old.

Adults 50 years old and older.

People with a medical condition placing them as high risk for influenza complications. These include chronic heart or lung disease such as asthma or reactive airway disease.

People with medical conditions like diabetes or kidney failure.

People with illnesses that weaken the immune system, or who take medications that

TRICARE best insurer in America

TRICARE, the Defense Department-run health plan, is the best health care insurer in the nation, according to customers in a nationwide survey.

Kaiser Permanente, Care-First Blue Cross Blue Shield, AARP, and Blue Cross Blue Shield of Michigan followed TRICARE in survey standings.

"TRICARE's government-provided plans have the highest satisfaction," said Jim Wilson, president of Wilson Health Information, the firm that conducted the survey. "It might be because of the fact that members have minimal co-pays and freedom to choose how they receive their health care and prescriptions."

In January and February, Wilson Health Information sent eight-page surveys to more than 70,000 households and received about 35,000 responses to questions regarding health care utilization, delivery and patient satisfaction. The survey measured member "satisfaction" and "importance" ratings on a scale of highly satisfied and very important to not important at all.

See FLU, Page 7

See TRICARE, Page 7

Commander discusses philosophy

By Col. Judith Ruiz
GLWACH Commander

It's hard to believe I've been here three months already. During that time, I've visited most sections in the facility, and I'm impressed.

I know the challenges this organization has faced in the past, and I know there will be more to come in the future. I'm looking forward to working with you as we tackle those challenges, and I'm sure great things are in store.

I'm honored to serve as the General Leonard Wood Army Community Hospital Commander, and I'll do everything I can to move us further down the road of success. But before we start, I'd like to share with you five key behaviors that I believe lead to success. They are:

- ◆ Results over status
- ◆ Accountability over popularity
- ◆ Clarity over certainty
- ◆ Conflict over harmony
- ◆ Trust over vulnerability

Let's take a look at each one.

◆ Results over status: Whether you're a housekeeper, a lab tech or the OIC of pharmacy, know that results are how we gauge success. It's not personality based. I think it's great that

we have people who have been here 30 or 35 years, have done outstanding work and still have that energy and drive to do the right thing. But, we need to hold every single person accountable for results, not just a few. Performance standards are very important. At the end of the year, my report card is going to be what I told you I could get accomplished in a year. Brig. Gen. Gilman and Brig. Gen. Martin are going to hold me accountable for those things. I will do the same for the people I rate and expect everyone to perpetuate that same standard across the ranks.

◆ Accountability over popularity: I will hold each and every one of you accountable, no matter who you are, and you need to do the exact same thing. It's pretty hard for some to do that sometimes because nobody wants to be the bad guy. We all know that doing the right thing isn't always the popular thing, but it's what must be done. I trust each of you to do the right thing and hold yourselves and others accountable for decisions and actions.

◆ Clarity over certainty: When it comes to making decisions and getting things

done, move out. Don't wait to get the exact solution or the exact OP order before you move on and make a decision. You won't get that from me, I will make a decision. If you or I make a decision and it's wrong, we'll have time to rectify it. That in no way is an indication of failure on anyone's part. I want you to have as much clarity as possible on an issue before charging forward, but in many cases certainty will never come. If we're going the complete wrong direction, you need to tell us that so we can adjust fire. We live in a time that is fast track and we can't stand still for long, so keep moving forward even in times when you're not 100 percent sure what the true solution is.

◆ Conflict over harmony: Some people are content to sit around the table and smile when inside they're chomping at the bit, all because they don't like conflict. I'd rather have conflict over harmony, especially if it's going to improve my decision-making process. If there are issues you need to bring forward to your co-workers or supervisor, do it. There's a professional way of doing that, and we all are professionals here. I think it's OK to disagree and you should,

too. No one should be intimidated about that. We're in 2008 now, and the Army has changed the way it does business. Sometimes two people just need to agree to disagree and come to a common ground.

◆ Trust over vulnerability: We've got to trust one another. I trust each and every one of my deputies, and you need to trust your fellow workers and supervisors. Unless they've given you another reason not to trust them, it's important that we base our professional relationships on trust. I realize that not everyone is going to like each other, but it's not about that. It's about doing the right thing to take care of Soldiers and their families. We have to be able to trust that each of us knows what we're doing and are doing things for the right reason.

There you have it, my leadership philosophy in a nutshell. I'm very much looking forward to what the next two years brings – the challenges and the great solutions you develop to deal with them.

But no matter what, our focus must always be fixed on providing top-quality health care for our Soldiers and families.

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.

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Blog enhances communication

New tool offers community way to speak with, hear from Commander

By Carl Norman
GLWACH Marketing

To better communicate with eligible beneficiaries and other community members, the General Leonard Wood Army Community Hospital Commander has established a computer blog.

The blog can be found at

http://glwach.amedd.army.mil/CDRBlog/BLOG_POSTS.htm and will discuss various subjects that will change each month. Everyone is encouraged to visit the blog and submit comments. There are a few rules to follow:

1. All comments are moderated.
2. All participants must treat each other with respect.
3. All comments will be reviewed before posting. We will not post comments that contain vulgar language, personal attacks of any kind, or offensive terms that target

specific ethnic or racial groups.

4. We will not post comments that are spam, are clearly off topic or that promote services or products.

5. Comments that make unsupported accusations will also not be posted.

6. Reporters and other media representatives are asked to send questions to the GLWACH Public Affairs Office through their normal channels and to refrain from submitting questions on the blog. Reporter questions will not be posted.

Additionally, when submitting a comment, provide your name, or at least a contact number, so hospital officials can reach you and thank you for your great idea or delve more into the issue you've raised.

Please understand that we may not be able to pursue every suggested initiative, and some issues may be rooted in regulatory requirements or federal law that we do not control.

For more information, call the GLWACH Public Affairs Office at (573) 596-9632.

Soldiers encouraged to learn benefits

FALLS CHURCH, Va. – November is Warrior Care Month, and TRICARE wants to educate wounded, ill and injured service members about their benefits.

"It is our goal to share with all service members as much information about their benefits as possible," said Maj. Gen. Elder Granger, TRICARE Management Activity deputy director. "Currently, we are trying to educate our beneficiaries about what we are doing for severely wounded, ill and injured service members.

"Recently, I met a young husband and wife in Colorado. The Keils are a great family with an amazing recovery story. The young man, an Army staff sergeant, was shot through the neck while establishing a patrol base in Iraq.

"I was much honored to meet a hero like Matt," Granger said. "He's a fine example of what we do for our service members and families in the TRICARE network. These men and women give so much for us, to protect us. It continues to be our goal to provide the best care possible," Granger said.

Wounded, ill and injured service members have many benefits available to



TRICARE representatives like Maricela Naime (right) are standing by to help beneficiaries with TRICARE-related questions. Stop by Building 470, Room 2222. (Photo by Carl Norman)

them. The National Defense Authorization Act includes several sections that discuss new or developing benefits designed to address specific needs of service members who may have been severely wounded, ill or injured as a result of supporting contingency operations. Some of these benefits are retroactive.

"Wounded, ill or injured service members must pay attention to their benefits as they process out of the military," reminds Granger. "Service members have given so much, the last thing we want is for benefits to be a challenge or for service members to lose benefits because of lack of information."

Because his disability is so recent, Matt Keil is not yet enrolled in Medicare. In early 2009 he will receive information concerning Medicare enrollment.

At that time, he will have to enroll in Medicare Part B to keep his TRICARE benefits. A local TRICARE benefits counselor is working with Matt and Tracy to help answer their questions.

Wounded, ill and injured Soldiers at Fort Leonard Wood face the same situation as the Keils. Diane Hell, General Leonard Wood Army Community Hospital TRICARE service representative supervisor, said she and her staff stand ready to help.

"We encourage Soldiers and their families to come to Building 470, Room 2222 to get information about their TRICARE benefits," Hell said. "We want to know their situation and show them what's available and what they need to do, in detail, to get the care they need."

If a Soldier or family member is unable to visit Building 470, they, or their family members, can call 1-866-299-4234 and ask for a TRICARE benefits representative. For more information, visit <http://www.tricare.mil> or call 1-888-TRIWEST.

Knowings signs helps holiday blues

Less stress,
more fun key
to enjoying
season's
festivities

By **Barbara Welch**
Behavioral Medicine
Division

Ah, the holiday season is almost here.

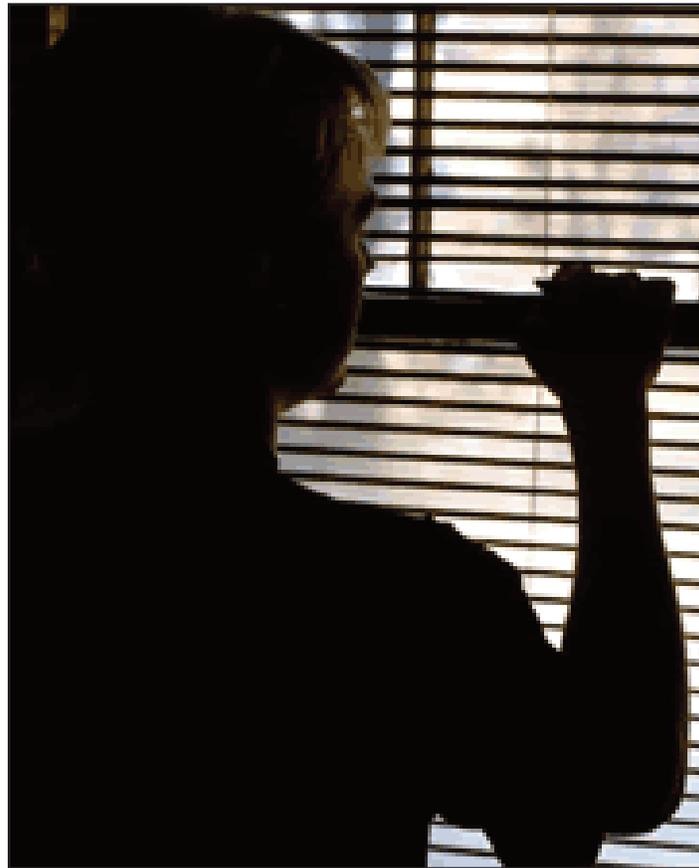
For many, this means friends, family and co-workers getting together, celebrating, relaxing and having fun. But for others, it could mean a case of the "holiday blues."

People get the holiday blues when they feel sad, lonely, depressed or overly anxious around the holiday season. This most commonly happens during the December holidays when everyone else in the world seems to be celebrating.

The blues can result from a mismatch between high expectations for the perfect holiday mixed with memories of holidays past, loved ones no longer present and the reality of the current holiday.

Symptoms include:

- ◆ Headaches
- ◆ Inability to sleep or sleeping too much
- ◆ Changes in appetite causing weight loss or gain
- ◆ Agitation and anxiety
- ◆ Excessive or inappropriate feelings of guilt
- ◆ Diminished ability to think clearly or concentrate
- ◆ Decreased interest in activities that usually bring pleasure such as food, sex, work, friends, hobbies or en-



December is a time of year when many people get the holiday blues. (Courtesy photo)

tainment.

Many things can trigger the holiday blues. Some common culprits include overspending, overdrinking, the pressure of numerous social commitments, pressure to create the perfect holiday experience for friends and family, missing loved ones who are deployed and reminders of those lost.

Health officials estimate that 9.5 percent of the American population — or about 20.9 million Americans — suffer from chronic depression.

Although the holiday blues are short lived, people recover as they slip back into a normal lifestyle after the holidays, the stressors and how

they react to those stressors can be a year-long occurrence.

There are many things people can do to reduce "holiday stress," and they involve making choices. For example:

- ◆ Choosing to limit commitments to those they'll actually have time to enjoy can take away rushed or pressured feelings.
- ◆ Sticking to a reasonable budget can take the worry out of spending.
- ◆ Avoiding excessive drinking and eating, and getting enough rest and exercise can help overcome fatigue and provide an energy reserve.

If loneliness is part of the

"blues," gently, but firmly, give yourself a push to look at the activities in your local community. Craft fairs, cookie walks and parades abound; each community especially shines this time of year.

Take a drive to see the lights. Visit each community's special presentations. You might begin by attending your place of worship and even visiting other church Christmas performances which are always geared for the entire community to enjoy.

Volunteering to help others is another great way to combat loneliness and the holiday blues. Do something for someone else.

Help out in a meal kitchen for the homeless. Contact your local Red Cross for information on how and where you can volunteer.

Make a commitment to yourself to not allow the holidays to be stressful. Catch negative thoughts that add pressure, guilt or induce feelings of loss. Create a new way to celebrate.

Each season, each year is different and can be enjoyed in its own way. Stress the joy instead!

Take the advice from philosopher, author, painter, composer and Nobel laureate Rabindranath Tagore who said, "I slept and dreamt that life was joy. I awoke and saw that life was service. I acted, and behold service was joy."

(EDITOR'S NOTE: Barbara Welch is a licensed clinical social worker credentialed by the Academy of Certified Social Workers.)

The Health Insurance Portability and Accountability Act of 1996, otherwise known as HIPAA Privacy Rule, is a Federal law that sets national standards for how health plans, health care clearing-houses, and most health care providers are to protect the privacy of a patient's health information.

General Leonard Wood Army Community Hospital officials want to help everyone understand what is and isn't allowed under HIPAA.

The questions and answers here explain when a health care provider is allowed to share a patient's health information with the patient's family members, friends, or others the patient identifies as involved in his or her care.

Q: If the patient is present and has the capacity to make health care decisions, when does HIPAA allow a health care provider to discuss the patient's health information with the patient's family, friends, or others involved in the patient's care or payment for care?

A: If the patient is present and has the capacity to make health care decisions, a health care provider may discuss the patient's health information with a family member, friend, or other person if the patient agrees or, when given the opportunity, does not object. A health care provider also may share information with these people if, using professional judgment, he or she determines the patient does not object. In either case, the health care provider may share or discuss only the information the person involved needs to know about the patient's care or payment for care. Here are some examples:

◆ An emergency room doctor may discuss a patient's treatment in front of the patient's friend if the patient asks that her friend come into the treatment room.

◆ A doctor's office may discuss a bill with the patient's adult daughter who is

Health Insurance Portability and Accountability Act of 1996 helps...



present at the patient's medical appointment and has questions about the charges.

◆ A doctor may discuss medication a patient needs to take with the patient's health aide who has accompanied the patient to a medical appointment.

◆ A doctor may give information about a patient's mobility limitations to the patient's sister who is driving the patient home from the hospital.

◆ A nurse may discuss a patient's health status with the patient's brother if she informs the patient she is going to do so and the patient does not object. However, a nurse may not discuss a patient's condition with the patient's brother after the patient has stated she does not want her family to know about her condition.

Q: If the patient is not present or is incapacitated, may a health care provider still share the patient's health information with family, friends, or others involved in the patient's care or payment for care?

A: Yes. If the patient is not present or is incapacitated, a health care

provider may share the patient's information with family, friends, or others as long as the health care provider determines, based on professional judgment, that it is in the patient's best interest. When someone other than a friend or family member is involved, the health care provider must be reasonably sure that the patient asked the person to be involved in his or her care or payment for care. The health care provider may discuss only the information the person involved needs to know about the patient's care or payment. Here are some examples:

◆ A surgeon who did emergency surgery on a patient may tell the patient's spouse about the patient's condition while the patient is unconscious.

◆ A pharmacist may give a prescription to a patient's friend who the patient has sent to pick up the prescription.

◆ A hospital may discuss a patient's bill with her adult son who calls the hospital with questions about charges to his mother's account.

◆ A health care provider may give information regarding a patient's drug dosage to the patient's health aide who calls the provider with questions about the particular prescription. However, a nurse may not tell a patient's friend about a past medical problem that is unrelated to the patient's current condition.

◆ HIPAA does not require a health care provider to share a patient's information when the patient is not present or is incapacitated, and can choose to wait until the patient has an opportunity to agree to the disclosure.

For more information, call the General Leonard Wood Army Community Hospital Patient Administration Division at (573) 596-9765.

(Information courtesy of the U.S. Department of Health and Human Services, Office for Civil Rights.)

News Briefs

Attention CITI card holders:

◆ In order for cards to be active Nov. 30, cards must be receipt verified. If you will be traveling Nov. 29-30, be sure to carry both charge cards — Bank of America and CITI — as this is the changeover period. Charge all official travel expenses up to and including Nov. 29 to your current Bank of America card. Travel expenses incurred after noon Nov. 30 should be charged to your new CITI card.

◆ Protect yourself from online fraud, or “phishing.” CITI will never ask you for your password or to update personal or business information via e-mail. If you receive e-mail you believe to be suspicious or fraudulent, forward the message to submitphishing@citi.com.

◆ To assure access to cash while traveling, cardholders should call to customize their Personal Information Number (PIN) ahead of time.

For more information, call 6-0520.

First quarter POSH training

First quarter POSH training is scheduled for the following dates. All GLWACH staff members should attend as their training requirements mandate. The class schedule is:

◆ Nov. 26, 3-4 p.m., Dining Facility

◆ Dec. 3, 3-4 p.m., Dining Facility

◆ Dec. 10, 3-4 p.m., Dining Facility

◆ Dec. 17, 3-4 p.m., Dining Facility

For more information, call 596-0471.

Holiday mailing deadline

It's not too early to start thinking about holiday cards, letters and packages destined for service members and their families stationed overseas. The U.S. Postal Service recommends sending packages early. The deadline for sending holiday packages to troops stationed overseas is Dec. 11 when using priority mail. All military mail, regardless of destination, is sent by domestic mail rate. International rates do not apply to military mail delivery. The U.S. Postal Service has a Military Care Kit to make it easier to mail packages overseas. The free kit may be ordered by calling the USPS Expedited Package Supply Center at 1-800-610-8734. Another option is the Priority Mail Large Flat-Rate box introduced earlier this year. It offers a \$2 discount to Air/Army Post Office (APO) or Fleet Post Office (FPO) destinations. The complete list of military mailing deadlines is available at http://www.usps.com/communications/newsroom/localnews/in/in_2008_0916_DR.htm.

Section name change

GLWACH's Plans, Training, Mobilization, Security, Readiness, Operations, and Education (PTMSROE) section under the Deputy Commander for Administration changed names Nov. 21. The new name is Plans, Education, Readiness, Training, Security, Mobilization and Operations (PERTSMO). For more information, call 596-0513

Vision readiness update

Soldiers can update their vision readiness in MEDPROS at the 43rd Optometry Clinic (Building 2100) from 12:30 – 2 p.m. Monday – Friday. For more information, call 596-0048.

Update BLS cards

All GLWACH staff members are asked to check their Basic Life Support cards to make sure they're current. Anyone who is expired or will expire soon should e-mail Lt. Col. Randel Cassels so he can plan additional classes during the next 45 days. Anyone who has recently completed BLS and are tracked by credentials, take a copy to them. All others, make certain this is tracked in your Competency Assessment Folder. For more information, call 596-0513.



Tier A champs

General Leonard Wood Army Community Hospital athletes recently captured Tier A Overall Champion honors in the 2008 Commander's Cup Series. Several hospital staff members journeyed to Lincoln Hall in the Maneuver Support Center for the trophy presentation. Hospital athletes earned 658 points in flag football, volleyball, bowling, basketball, swimming, tennis, golf, 5K cross country run and softball to bring the trophy home. Congratulations to all GLWACH athletes. (Photo by Carl Norman)

FLU, from Page 1

can weaken the immune system.

Children less than 5 years old who have a history or recurrent wheezing.

Children or adolescents taking aspirin.

People with a history of Guillain-Barre syndrome, a rare nervous system disorder.

Pregnant women.

Active-duty military members will receive flu immunizations at scheduled appointments with their respective units, said Maj. John Westhoff, GLWACH Primary Care and Community Medicine Division chief. Soldiers missing the immunization at their unit will have a make-up day scheduled.

Those being reassigned to overseas locations before the Holiday Block Leave begins should wait until they go through the Preparation for Overseas Reassignment



Sherri Stephens, GLWACH Immunization Clinic, gives Sabine Labib her annual flu mist immunization, Nov. 4. One simple sniff in each side of the nose is all it takes. (Photo by Carl Norman)

process where they'll get all necessary immunizations at one time.

All Department of the Army civilian employees, regardless of military retiree status, must report to the Occupational Health Clinic to have their records screened before getting the immunization, said Teresa Long, Occupational Health chief. The clinic is lo-

cated in Building 2080 at the University of Missouri Technology Park on Replacement Avenue. Civilian employees can receive the vaccine on Monday, Wednesday and Friday from 8 – 10:30 a.m. and noon – 3 p.m.

GLWACH's Immunization Clinic is administering flu immunizations to all other eligible beneficiaries in Room

109-32 on the first floor of the hospital. While the yellow shot record is no longer required, hospital officials recommend bringing it to keep current. No prescription or provider order is needed to receive an immunization.

Children, age 6-35 months, can receive the preservative-free FluZone vaccine at the GLWACH Immunization Clinic.

"There is an ample supply of the injectable vaccine available for pediatric patients," Westhoff said. "If this is the first time ever receiving this vaccine, children will need a second dose in 30 days."

The Occupational Health and Immunization clinics are open 8 a.m. – 4 p.m. Monday – Wednesday and Friday, and 8 a.m. – 1:30 p.m. Thursday. They are closed on all federal holidays and training holidays.

TRICARE, from Page 1

"We asked: 'How satisfied are you with your health plan overall?'" said Wilson. "People who are enrolled in TRICARE report the highest overall satisfaction scores compared to all other health insurance carriers."

In describing the questionnaire, Wilson said his firm's survey closely followed a structured interview.

"We ask consumers to tell us the name of their insurance carrier, plan sponsor, what kind of plan it is, choices they have, length of time in plan, overall satisfaction and re-enrollment," he said.

The survey presented a list of about 30 plan features or attributes and asked partici-

pants to rate each one in terms of importance. Next, each member was asked to rate how satisfied they are with the services their current plan delivers.

"Plans will argue that the employer sets the cost, but customer service is something that they have 100 percent control over," Wilson said. "When you pick up the phone and call your plan, do you get right through to a person or do you land in what I like to call voice jail, that unending loop of prompts?"

He said he's seen some really bad systems and there are others that are very customer oriented.

Much disappointment

among consumers might be avoided if they understood the health plan's obligations and the fact that the employer is responsible for many of the plan policies. Insurers must make an effort to educate consumers about benefits packages, but that doesn't mean throwing a mountain of data at someone.

"Some of the booklets I've seen have been pretty straightforward," Wilson said. "Here's what you have.' 'Here are the options you have.' Others are just too much.

"I get this book from my insurer that's about 150 pages thick. I can't understand the legalese. It all comes back

to: How easy is the plan to use and can I easily understand the information that is sent to me."

Health plans not only must contend with each other in the marketplace as well as demands placed on them by purchasers, but also with consumers' high expectations, Wilson said.

"Expectations for health insurance issues are very high across the board. And plans must ultimately meet the needs of the member to minimize the number of dissatisfied and unhappy employees."

For more information about TRICARE and the benefits available, call 1-866-299-4234.

Community Health Resource Center Classes

EDITOR'S NOTE: The Community Health Resource Center has relocated to the University of Missouri Technology Park on Replacement Avenue. The address is 197 Replacement Avenue, Building 2081. For more information or directions, call (573) 329-1901 or 329-1935.

Below is the General Leonard Wood Army Community Hospital Community Health Resource Center Class Calendar for Nov. 14 – Dec. 31, 2008.

All classes are conducted in Suite 124, Building 2080 unless otherwise noted. Sign up for classes by calling (573) 329-1901 or (573) 329-1935. 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:

◆ Dec. 3, 9-11 a.m.

◆ Dec. 17, 9-11 a.m.

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

◆ Nov. 26, 9 – 11 a.m.

◆ Dec. 12, 9 – 11 a.m.

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

◆ Dec. 1, 2 – 4 p.m., Nursing Conference Room, 4th floor at GLWACH

◆ Dec. 4, 5:30 – 7:30 p.m., MEDDAC Classroom at GLWACH

◆ Dec. 8, 2 – 4 p.m.

◆ Dec. 11, 5:30 – 7:30 p.m., MEDDAC Classroom at GLWACH

◆ Dec. 18, 5:30 – 7:30 p.m., MEDDAC Classroom at GLWACH

— **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 date:

◆ Dec. 8, 1:30 – 3 p.m., MEDDAC Class-

room at GLWACH.

— **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:

◆ Dec. 5, 8 a.m. – noon

◆ Dec. 19, 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:

◆ Dec. 2, 8:45 -10:45 a.m.

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

◆ Nov. 26, 2:30 – 4 p.m.

◆ Dec. 3, 2:30 – 4 p.m., Building 2080, Suite H

◆ Dec. 4, 9:30 – 11 a.m., Building 2080, Suite H

◆ Dec. 5, 1 – 2:30 p.m., Building 2080, Suite H

◆ Dec. 10, 2:30 – 4 p.m., Building 2080, Suite H

◆ Dec. 11, 9:30 – 11 a.m., Building 2080, Suite H

◆ Dec. 17, 2:30 – 4 p.m., Building 2080, Suite H

◆ Dec. 18, 9:30 – 11 a.m., Building 2080, Suite H

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

◆ Nov. 25, 9 – 10:30 a.m.

◆ Dec. 2, 9 – 10:30 a.m., Building 2080, Suite H

◆ Dec. 9, 9 – 10:30 a.m., Building 2080, Suite H

◆ Dec. 16, 9 – 10:30 a.m., Building 2080, Suite H

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

◆ Dec. 10, 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

dates:

◆ Nov. 25, 5:30 – 7:30 p.m., MEDDAC Classroom at GLWACH

◆ Dec. 16, 5:30 – 7:30 p.m., MEDDAC Classroom at GLWACH

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

◆ Dec. 12, 1 – 2 p.m., Legal Assistance Office, Building 1706

— **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 date:

◆ Dec. 1, 1:30 – 3 p.m., MEDDAC Classroom at GLWACH

— **Pregnancy/Post Partum Physical Training:** Mandated by the U.S. Army Center for Health Promotion and Preventive Medicine, this class is a standardized physical training program that is mandatory for all post partum Soldiers Army wide. Class dates:

◆ Nov. 25, 7:30 – 8:30 a.m.

◆ Dec. 2, 7:30 – 8:30 a.m.

◆ Dec. 9, 7:30 – 8:30 a.m.

◆ Dec. 16, 7:30 – 8:30 a.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:

◆ Nov. 26, 1 – 3 p.m.

◆ Dec. 3, 1 – 3 p.m.

◆ Dec. 10, 1 – 3 p.m.

◆ Dec. 17, 1 – 3 p.m.

— **Tobacco Cessation Support Group:** Provides an opportunity for peer support and discussion on stopping tobacco use and remaining tobacco free. No medications are prescribed at this meeting.

◆ Nov. 25, 3 – 4 p.m., Building 2080, Suite H

◆ Dec. 2, 3 – 4 p.m., Building 2080, Suite H

◆ Dec. 9, 3 – 4 p.m., Building 2080, Suite H