



The Heartbeat

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

October 2009

GLWACH flexible with H1N1 vaccine

When the H1N1 vaccine starts trickling into Pulaski County and Fort Leonard Wood, it will not be in quantities expected which is prodding General Leonard Wood Army Community Hospital to be flexible in its immunization plans.

“There is no projected shortage of vaccine; however, the amount needed to vaccinate the entire population will not be available all at once,” said Bruce Russell, GLWACH Preventive Medicine Division. “The vaccine will be evenly distributed across the United States, Missouri and Pulaski County.”

Pulaski County Health Department and GLWACH Preventive Medicine Division officials said that H1N1 vaccine priorities from the Cen-



Lt. Col. Aaron Jacob, Preventive Medicine Division chief, briefs vaccine information at an H1N1 town hall meeting Oct. 7. (Photo by Carl Norman)

ters for Disease Control and State Health Department will be strictly followed. Those are:

- ◆ Pregnant Women
- ◆ People who live with or

care for infants younger than 6 months old

- ◆ Health care and emergency medical staff
- ◆ Anyone 6 months – 24 years old

◆ Anyone 25 – 64 years old who has a chronic medical condition

As vaccine becomes available these groups will be vaccinated:

- ◆ Healthy individuals 25 – 64 years old
- ◆ Adults 65 and older

Russell also emphasized that the H1N1 vaccine will come from two different sources – one for military members and one for all other populations.

The Defense Department will provide H1N1 vaccine for active duty and reserve military members as well as “critical” DOD civilian positions, Russell said. Military members overseas will be high priority for vaccination.

“We will receive the H1N1 vaccine for military members

See H1N1, Page 7

Shipping delays seasonal influenza shots

Vaccine arriving late from manufacturer causing immunizations to halt until November

By Carl Norman
GLWACH Marketing

General Leonard Wood Army Community Hospital’s seasonal influenza program hit a small bump recently as manufacturer shipping delays in some types of vaccine has made immunizations temporarily unavailable until

sometime in November.

GLWACH’s Immunization Clinic used their last injectable dose about a week ago, and local health departments are experiencing the same delays, according to Bruce Russell, GLWACH Preventive Medicine Division.

“We don’t know exactly when we’ll receive more injectable seasonal flu vaccine; however, we don’t expect it before the end of October,” he said.

Once the vaccine arrives and immunizations resume, Russell recommends that people talk with their doctor before getting a flu shot if they’ve ever had a severe allergic reaction to eggs or to a

previous flu shot, or they have a history of Guillain–Barré Syndrome that occurred after receiving influenza vaccine.

Center for Disease Control experts recommend that people who are sick with a fever when going to get their seasonal flu shot get it at a later date. However, they can get a flu shot at the same time they have a respiratory illness without fever or if they have another mild illness.

The flu mist is recommended for healthy individuals age 2 to 49 years. Unless a physician decides the potential benefit outweighs the potential risk,

See DELAY, Page 7

Medical record bloopers abound

We've all seen sports bloopers and TV bloopers — well, how about medical bloopers?

The people at DoctorsLounge.com have collected several examples of the unintentionally funny things doctors have written in medical files. Everything you will read, including bad spelling and grammar, has been lifted directly off of these reports. All of the names have been omitted to protect the innocent and not-so-innocent!

Too much work or too much to think about are probably the reasons that lead to the following mistakes and bloopers which were assembled from medical charts:

- ◆ The lab test indicated abnormal lover function.

- ◆ The baby was delivered, the cord clamped and cut, and handed to the pediatrician, who breathed and cried immediately.

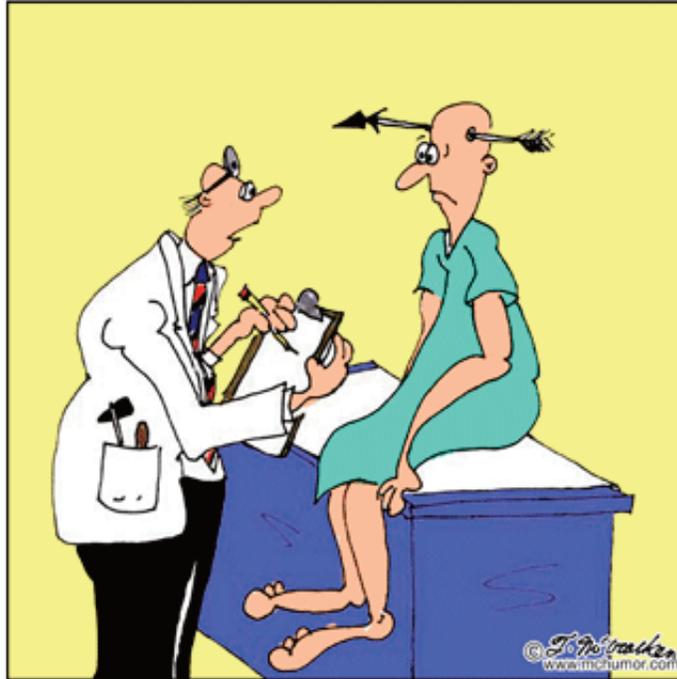
- ◆ She stated that she had been constipated for most of her life until 1989 when she got a divorce.

- ◆ The patient was in his usual state of good health until his airplane ran out of gas and crashed.

- ◆ Rectal exam revealed a normal size thyroid. (Long fingers?)

- ◆ Between you and me, we ought to be able to get this lady pregnant.

McHUMOR.com by T. McCracken



“Off hand, I'd say you're suffering from an arrow through your head, but just to play it safe, I'm ordering a bunch of tests.”

- ◆ The patient lives at home with his mother, father and pet turtle, who is presently enrolled in day care three times a week.

- ◆ She is numb from her toes down.

- ◆ Exam of genitalia was completely negative except for the right foot.

- ◆ The patient was to have a bowel resection. However, he took a job as stockbroker instead.

- ◆ When she fainted, her eyes rolled around the room.

- ◆ Whilst in Casualty she was exam-

ined, X-rated and sent home.

- ◆ On the second day the knee was better and on the third day it had completely disappeared.

- ◆ The patient has been depressed ever since she began seeing me in 1983.

- ◆ Patient was released to outpatient department without dressing.

- ◆ The patient is tearful and crying constantly. She also appears to be depressed.

- ◆ Discharge status: Alive but without permission.

- ◆ The patient will need disposition, and therefore we will get Dr. Blank to dispose of him.

- ◆ Healthy-appearing, decrepit 69 year old male, mentally alert but forgetful.

- ◆ The patient has no past history of suicides.

- ◆ The patient expired on the floor uneventfully.

- ◆ Patient has left his white blood cells at another hospital.

- ◆ Patient was becoming more demented with urinary frequency.

- ◆ The patient's past medical history has been remarkably insignificant with only a 40 pound weight gain in the past three days.

- ◆ She slipped on the ice and apparently her legs went in separate directions in early December.

- ◆ Patient has chest pains if she lies on her left side for over a year.

The Heartbeat

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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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Women: Take time to protect heart

By Maj. Brian Taylor
Physical Therapy Clinic

Heart disease is the No. 1 killer in the United States!

One-in-four women in the United States die of heart disease while one-in-30 dies of breast cancer. An estimated 23 percent of women die within one year after having a heart attack, and two-thirds of women who have a heart attack fail to make a full functional recovery.

No matter what your age is, I hope that this raises your eyebrows and makes you think about yourself and your loved ones. The fact is, if you have a heart, you're at risk at developing heart disease and you should be proactive in taking the steps to minimize your risk and lessen its impact on you and your family.

Coronary heart disease occurs when the arteries that carry blood to the heart muscle become hardened and narrowed as plaque builds up on the vessel's inner walls. This causes problems with blood flow to the heart muscle tissue to keep it healthy and working correctly.

Heart disease can lead to a heart attack. This is where permanent damage occurs in the heart muscle and the extent of the damage will have a major impact on how or if you recover.

There are many risk factors for developing heart disease, but we'll only discuss two major ones that you have some control over here. They are being overweight and not engaging in enough physical activity.



I'm sure you can already decide whether you have one of these risk factors. But, remember, a damaged heart can interfere with all your life's enjoyable activities, even simply taking a small walk or visiting family and friends.

Doesn't it make sense to stop and address any issues that can keep you enjoying the life that you are able to live! There is a quote that a doctor once said and I think each of you should keep in your mind. He said, "Heart disease is a now problem. Later may be too late."

To help combat heart disease, set your sights on achieving and maintaining a healthy weight. This may require interactions with multiple health care providers from your family physician, registered dietician and your own personal support group.

You know yourself best; determine what your healthy weight is and what you need to do to get there. Use the various resources available, especially your health care

team to help you get the information you need. Your health care team can help you set reasonable and healthy goals and establish a plan to achieve them.

You also need to make sure you're active enough to keep your heart healthy. This message mirrors the discussion about getting to a healthy weight. But, I want to make sure you understand that regular physical activity is a powerful way of reducing your risk of heart disease.

The good news is you don't have to run a race all day. To reduce the risk of heart disease, you only need about 30 minutes of moderate activity each day.

To accomplish this, do whatever you like to do that makes your heart work at a "somewhat hard level" for 30 minutes. Make it something you enjoy, but be creative to make sure your activity is making you work your heart.

If you follow the general principle of being able to carry on a conversation with someone while doing the ac-

tivity but still feel like it's somewhat difficult, you will be working at an appropriate safe level. So get up and move!

Some additional risk factors you have some control over include smoking, high blood pressure, high blood cholesterol and diabetes.

Smoking is the leading cause of preventable death and disease in the United States; enough said there.

Second, high blood pressure is known as the "silent killer" because it may not cause any symptoms and you may not even know you have it. But, that doesn't stop it from having a big impact on your future health.

Last, but not least, is diabetes and high blood cholesterol which have similar stories. They both can go undetected because you may not show any symptoms. However, both of these issues can seriously impact your future health.

It would be a great if you'd discuss with your family physician your status with each of these risk factors and develop a plan to make changes in these areas to lower your overall risk for heart disease. Remember, it's your life and only you can be proactive enough to make sure you improve your chances of living it as healthy as you can!

Every woman, regardless of their age, should take heart disease seriously and reduce their risk of developing heart disease and the impact it could have on their lives. Stay active and lessen your chance of heart disease!

Even superwomen must watch health

By 1st Lt. Mary Staudter

GLWACH Nutrition Care Division

Women are often pulled in many directions. They're co-workers, bosses, moms and friends... all day, every day. There just doesn't seem to be enough time in the day they can feel like they're doing any of these jobs well, much less all of them.

For women who regularly face this scenario, taking care of their personal health tends to be toward the bottom of the "to do" list. However, taking care of their health is most definitely not something they should be putting on the back burner.

Everyone only has one, irreplaceable body, and how well it's taken care of directly affects how well working women fill the many roles they play. So, take a moment to read over these basic tips to get you started.

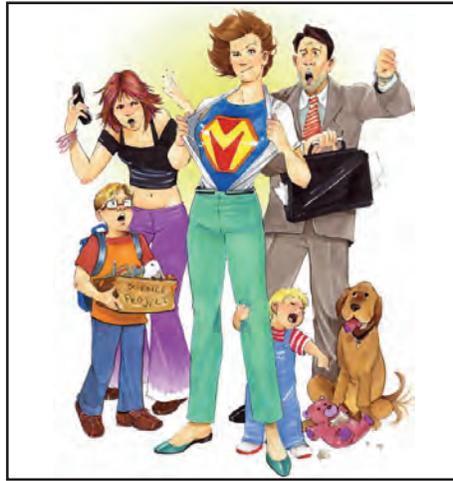
Feeding Your Family: Undoubtedly, every mother feels responsible for her children's well-being. This starts with one of their most basic necessities — food!

Moms are often pulled in many different directions and may feel that preparing healthy meals for the family requires time they just don't have. If this applies to you, take a thorough tour of the frozen food aisle next time you're grocery shopping to acclimate yourself to the many healthy and convenient options available.

Most frozen fruits and vegetables can be purchased at a lower cost than fresh vegetables, and they're often a close second to fresh produce in nutritional quality. Preparing frozen vegetables for a meal can be as simple as placing a steamable bag in the microwave for 4-5 minutes, or pouring frozen vegetables onto an electric skillet or in a crock pot or casserole dish to add a healthy touch to any meal.

Vegetables are an essential component of any weight friendly lifestyle, as they provide volume to virtually any dish, while decreasing the caloric content per serving.

Visit http://www.cooks.com/rec/search/0,1-0,frozen_vegetables,FF.html or <http://all-recipes.com/HowTo/Fresh-Meals-Using-Frozen-Foods/Detail.aspx> for a number of recipes and ideas to help incorporate



frozen vegetables into easy-to-prepare meals.

Some additional convenient cooking tips include:

- ◆ Use the crock pot to have meals cooking all through the day – it will be ready to eat when you get home from a busy day at work.

- ◆ Try replacing your meat entrée with canned beans for a couple meals throughout the week; beans require virtually no preparation, are loaded with nutrients, are very low in fat, and are very low in price.

Embrace the value of leftovers! By preparing large portions and safely storing half of what you prepare, you'll get two meals out of the time it took to prepare one.

Use this same concept and do the majority of your cooking and food preparation during the weekend, then freeze portions to use throughout the busy work week. (Tip: soups, chili, lasagna, and most casseroles freeze and reheat very well!)

Visit <http://www.dashdietoregon.org/make/meals/Quick-and-Healthy-Meals> for many additional healthy and convenient meal and ideas.

Making Your Health a Priority: Time management often requires prioritizing the many tasks you must accomplish. Why then, when lack of health can put an immediate halt to your productivity, would you put taking care of yourself on the back burner?

If you often find yourself skipping breakfast or lunch and never finding time for exercise or sleep, it may be time to re-evaluate your schedule and find some way to squeeze these important health components into your lifestyle.

If you find yourself skipping breakfast most days, try some of these convenient breakfast options:

- ◆ Granola bars (look for high fiber, low sugar brands)

- ◆ Yogurt (light yogurts have half the sugar content of regular)

- ◆ Fruit (eat an apple or a peach before you start to work)

- ◆ Meal replacement shakes or bars

- ◆ Carnation Instant Breakfast mixed with 8 oz of low-fat milk

- ◆ Instant oatmeal (if you have a microwave, you can prepare this at work)

- ◆ Hard-boiled eggs and toast (boil a batch of eggs on the weekend so they'll be ready to go throughout the week)

- ◆ Bring a container of cereal and a carton of milk to work to eat at your desk

Having healthy lunches on hand requires planning. The best way to ensure you'll get to eat lunch during a busy work day is to pack it for yourself the night before.

While your kids are packing their lunches for school, spend some extra time with them and pack one for yourself. Make a little extra for dinner so you can conveniently pack leftovers for your lunch the following day.

Stock up on low-fat, low-calorie frozen meals so you always have a healthy option with the push of a microwave button. Have plenty of yogurt and fresh fruits and vegetables available to snack on throughout the day.

Planning meals ahead of time will help minimize meal-skipping, which is essential to managing your weight and boosting your energy levels throughout the day.

So, despite the feeling that your health is just one of the many things you need to take care of, by recognizing its importance and following some of these survival guide tips, you'll be one step closer to being the superwoman you've always wanted to be!

At home flu care by the numbers

By Toni Caldwell

Infection Control Officer

Flu season is here and General Leonard Wood Army Community Hospital wants to offer some tips that can help people provide safer care for their ill loved ones at home.

When providing care to a household member who is sick with influenza, the most important ways to protect yourself and others who are to:

1 Have everyone in the household clean their hands often, using soap and water or an alcohol-based hand rub, especially after coughing or sneezing.

2 Keep the sick person in a room separate from the common areas of the house — a spare bedroom with its own bathroom, for example. Keep the sickroom door closed. This bathroom should be cleaned daily with household disinfectant.

3 Have the sick person wear a surgical mask if they need to be in a common area of the house near other people.

4 Provide the sick person tissues to use for sneezing and coughing. Provide a closed container to dispose of the used tissues.

5 Unless necessary for medical care, people with the flu should stay at home when they have a fever or during the time they are most likely to spread their infection to others. This time is seven days after onset of symptoms in adults, and 10 days after onset of symptoms in children.

If a person with the flu needs to leave the home, for a doctor's appointment as an example, they should cover their

nose and mouth when coughing or sneezing and wear a loose-fitting (surgical) mask if available.

6 Tell your health care provider who the sick person has contacted in your household who has chronic medical conditions that could place them at higher risk for influenza complications.

Household Cleaning, Laundry, and Waste Disposal

1 Throw tissues and other disposable items the sick person uses in the trash. Wash your hands after touching used tissues and similar waste.

2 Keep surfaces (especially bedside tables, surfaces in the bathroom, and toys for children) clean by wiping them down with a household disinfectant according to directions on the product label. If using individual moistened cloths, change them frequently — use one for the toilet, a new one for the sink, etc., then discard.

3 Linens, eating utensils and dishes sick people use do not need to be cleaned separately; however, they should not be shared without washing thoroughly first.

To wash linens, such as bed sheets and towels, use household laundry soap and tumble dry on a hot setting.

Avoid "hugging" laundry before washing it to prevent contaminating yourself.

Clean your hands with soap and water or alcohol-based hand rub right after handling dirty laundry.

If you are the caregiver:

1 Designate one person only as the ill person's caregiver if possible.

2 When holding small children who are sick, place their chin on your shoulder so they will not cough in your face.

3 Clean your hands with soap and water or use an alcohol-based hand rub after you touch the sick person or handle used tissue or laundry.

4 Caregivers might catch the flu from the person they're caring for, and then the caregiver could spread it to others before showing symptoms. Limit all household members' movement outside the home to essential business unless public health authorities recommend further restrictions.

5 Monitor yourself and household members for flu like symptoms and contact your local health care clinic if symptoms occur.

6 Minimize close face-to-face contact with the sick person. If unavoidable, try to wear a facemask. A simple blue "surgical" facemask is adequate for the majority of situations. Used facemasks should be taken off and immediately placed in the trash. Avoid reusing them if possible. Wash your hands immediately afterward.

Protect other people in the home

1 Clean Your Hands: Everyone should frequently clean their hands with soap and water. Use an alcohol-based hand rub frequently, including after every contact with the sick person or the person's room or bathroom. Use paper towels to dry your hands after washing or dedicate cloth towels to each person in the household.

2 Restrict visitors: The sick person should not have visitors other than caregivers. Friends and relatives should make a phone call — it's safer than a visit.

3 Avoid having pregnant women care for the sick person — they're at increased risk of influenza-related complications and immunity can be suppressed during pregnancy.

4 If possible, consider maintaining good ventilation in shared household areas — keeping windows open in restrooms, kitchen, bathroom, etc.

People with H1N1 flu who are cared for at home should:

1 Stay home for seven days after the start of illness or until well for 24 hours.

2 Get plenty of rest and drink clear fluids like water, broth, sports drinks and electrolyte beverages for infants to keep from being dehydrated.

3 Cover coughs and sneezes and clean hands with soap and water or an alcohol-based hand rub often, especially after using tissues and coughing or sneezing into hands.

4 Avoid close contact with others — don't go to work or school while ill.

Watch for emergency warning signs that might indicate you need to seek medical attention.

For more information, visit the Centers for Disease Control and Prevention Web site at <http://cdc.gov/flu/>, or call the CDC Hotline (1-800-CDC-INFO).

You can also visit the GLWACH Web page at <http://glwach.amedd.army.mil/>

Laughter: Truly the best medicine

By Chaplain (Lt. Col.) Scott Weichl
U.S. Army Center
for Health Promotion
and Preventive Medicine

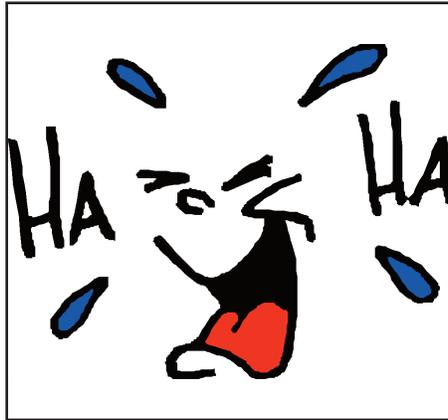
Have you ever been told to “lighten-up” or not “take things so seriously”?

Most of us have, and we often do just the opposite; however, we might want to start listening to that wise advice.

Researchers have found that humor and laughter actually strengthen the body against disease, reduce stress levels, lower blood pressure, increase energy levels and help improve relationships with others. So it looks like we do, indeed, need to become more serious about laughter.

Humor is used in medical and non-medical situations to improve healing, maintain sanity in a stressful world and also help deal with losses.

Over the years, I’ve realized that if I expected too much of myself, feelings of guilt and inadequacy overcame me when I thought I had not quite measured up. The ability to lighten-up and laugh helped reduce the tiredness, irritability, feeling of helplessness, lack of



productivity and higher level of stress that often accompanied this guilt.

By laughing at your difficulties, even in the most trying moments, you will not feel sorry for yourself. Rather, you’ll feel uplifted, encouraged and empowered — the core meanings of resiliency.

So, here are some tips to help you lighten your load, so to speak:

Daily Humor: Plan to use humor in your approach to everyday situations. A little planned humor for potential upsets and losses is like having a psychological insurance policy.

Read/Watch Humor: Reading humor-

ous stories and watching comedies is an excellent way to improve your laughter skills. Readers Digest has two sections devoted to humor – “Laughter is the Best Medicine” and “Humor in Uniform.” The Internet also has plenty of resources.

Smile: Remember to smile at yourself and others. Laughter is contagious, and humor can give you a sense of control in an otherwise powerless situation. Best of all, laughter is a free tool for improving mental and physical health. Laughter is one human response we were all born with, but work so hard as adults trying to prevent.

Take advantage of the power of laughter for a new perspective both at home and at work. Use laughter to decrease your stress, increase your energy and maintain balance. Belly laughs are best (in my opinion), but develop a laugh that works for you.

Researcher Lee Berk of Loma Linda University said in a Los Angeles Times article that “the benefits of laughter are similar to exercise.” Maybe we should all be laughing during Army Physical Fitness Training!

GLWACH looking to raise survivor numbers

By Shelley Bates
Mammography Technologist

More than 2 million breast cancer survivors are living in the United States, and General Leonard Wood Army Community Hospital is doing its part to help that number grow.

During October, GLWACH is celebrating Women’s Health Month by encouraging women to make sure they have a current mammogram which helps detect the disease early.

GLWACH uses Fuji Computed Radiography Mammography equipment, better known as digital mammography. From the patient’s point of view, mammography with a Full Field Digital Mammography is essentially the same as the past mam-

mography system and the examination is exactly the same – yes, even compression.

The difference is we can see the image right away rather than having to wait for a piece of film to run through a processor. Just like your digital camera, we can look at the digital mammogram image on a screen and change how light or dark it is. You can’t really change that with film.

Images can also be enlarged or highlighted to help diagnosis. The filmless system also completely eliminates all film and processing artifacts.

Digital mammograms tend to be higher contrast. We know that digital mammograms are better for women who have dense breast tissue, are under the age of 50, or are pre-menopausal. Plus, digital

mammography is a little more sensitive than film-screen mammography.

Another weapon we use to fight cancer is keeping our staff trained on the newest processes and our equipment upgraded to meet strict regulatory requirements.

In August, the GLWACH Radiology Department received a three-year term of accreditation from the American College of Radiology. The Food and Drug Administration also inspects the GLWACH mammography department each year to make sure we’re following strict rules and testing as set forth by the Mammography Quality Assurance Act.

So, join us in fighting breast cancer and call (573) 596-0029 to schedule your yearly screening mammogram at GLWACH!

H1N1, from Page 1

through standard military channels," Russell said. "All other vaccinations will come through Public Health channels. Both sets of vaccine will, more than likely, not arrive at the same time."

The Post Immunization Team will orchestrate the military H1N1 vaccination process the same as it does the seasonal influenza program, Russell said. The Military Vaccine Agency has procured only H1N1 injectable vaccine for DOD which eliminates the 30-day concerns between seasonal and H1N1 vaccinations. Units will be scheduled as soon as vaccine arrives.

For non-military populations, the Pulaski County Health Department, along with Central Ozark Medical Center, St. John's Clinic in St. Robert, Dixon Family Practice and GLWACH's Immunization Clinic will begin immunizing as soon as the H1N1 vaccine is available.

"For the vaccine to be effective for children younger than 10, two doses, approximately one month apart, are required," Russell said. "All others getting the injectable vaccine can get their seasonal flu and H1N1 shots at



Bruce Russell, GLWACH Preventive Medicine Division (right) takes a question from Fort Leonard Wood civilian employee Jason Russell at the H1N1 town hall meeting Oct. 7. (Photo by Carl Norman)

the same time. Those getting the flu mist must wait 30 days between immunizations."

Here are some other factors to consider with both seasonal and H1N1 flu immunizations:

Children age 10 and older and adults are expected to need only a single dose.

If a patient was previously prescribed antiviral medication, the flu mist should not be administered until 48 hours after the patient stopped taking the antiviral medicine.

Unless a physician decides the potential benefit outweighs the potential risk, chil-

dren younger than 5 years old, who have asthma and recurrent wheezing, should not get the flu mist. The vaccination carries the potential for increased risk of wheezing.

In addition, administering the flu mist to people with compromised immune systems should be based on careful consideration of potential benefits and risks.

To determine what vaccine is available, GLWACH beneficiaries should call the hospital Immunization Clinic at (573) 596-1768 and DOD civilian employees contact the Occupational Health

Clinic at (573) 329-8512. Beneficiaries who receive their influenza vaccination from other sources or at their local health department may need to call for vaccine availability as well.

Once available, beneficiaries can get their H1N1 vaccinations at the GLWACH Immunization Clinic from 8 a.m. – 4 p.m., Monday, Tuesday, Wednesday and Friday. People don't need to bring their medical record to receive the vaccination. It will be documented in the electronic record.

When the H1N1 vaccine is available, DOD civilian employees can receive the vaccination at the Occupational Health Clinic, located in the Missouri Technical Park on Replacement Ave.

The national vaccine distribution plan and schedule may cause participating organizations to have limited supplies during the first phases of the program. Russell highly encourages individuals to contact their providers or supporting clinic to check for vaccine availability.

(Article courtesy of the GLWACH Preventive Medicine Division)

DELAY, from Page 1

children younger than 5 years old, who have asthma and recurrent wheezing, should not get the flu mist.

"The Immunization Clinic uses a strict screening guide from the Centers for Disease Control to clear individuals for getting flu mist," Russell said.

Additionally, he said administering the flu mist to people with compromised immune systems should be based on careful consideration of potential benefits and risks.

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Beneficiaries getting their seasonal influenza vaccination from other sources or at their local health department may need to call those facilities for vaccine availability.

Community Health Resource Center Classes

EDITOR's NOTE: General Leonard Wood Army Community Hospital's Community Health Resource Center is located in the University of Missouri Technology Park on East 4th Street, right off Replacement Avenue. For more information or directions, call 329-1901.

All classes are conducted in the CHRC, 197 Replacement Avenue, Suite 144 unless otherwise noted. Sign up for classes by calling 329-1901. Sign up for the Post-deployment Spiritual Wellness class by calling 596-1678.

Below is the General Leonard Wood Army Community Hospital Community Health Resource Center Class Calendar for Oct. 26 - Nov. 30, 2009.

— 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:

◆ Nov. 4, 9 – 11 a.m.

◆ Nov. 18, 9 – 11 a.m.

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

◆ Oct. 28, 9 – 11 a.m.

◆ Nov. 25, 9 – 11 a.m.

— Breast Pumping techniques: Class date:

◆ Nov. 13, 9 – 11 a.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 date:

◆ Oct. 26, 1:30 – 3 p.m., MEDDAC Classroom, 1st floor, GLWACH

◆ Nov. 9, 1:30 – 3 p.m., MEDDAC Classroom, 1st floor, GLWACH

— Diabetes Journey for Control :

◆ Session 1, Diabetes Overview, explains diabetes, blood glucose and insulin, and resolves some common myths. Class date: Nov. 3, 1 – 3 p.m.

◆ Session 2, Healthy eating, describes relationships between diabetes and food. Class date: Nov. 10, 1 – 3 p.m.

◆ Session 3, Monitoring your blood glucose, discusses blood glucose targets and what makes your blood glucose go up

and down. Class date: Nov. 17, 1 – 3 p.m.

◆ Session 4, Complications, explains potential long-term complications. Class date: Nov. 24, 1 – 3 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:

◆ Nov. 6, 8 a.m. – noon

◆ Nov. 20, 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:

◆ Nov. 2, 8:45 – 10:45 a.m., OB Conference Room, 3rd Floor, GLWACH

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

◆ Oct. 27, 9:30 – 11 a.m., Suite H

◆ Oct. 29, 12:30 – 2 p.m., Suite H

◆ Nov. 5, 12:30 – 2 p.m., Suite H

◆ Nov. 6, 1 – 2:30 p.m., Suite H

◆ Nov. 10, 9:30 – 11 a.m., Suite H

◆ Nov. 19, 12:30 – 2 p.m., Suite H

◆ Nov. 20, 1 – 2:30 p.m., Suite H

◆ Nov. 24, 9:30 – 11 a.m., Suite H

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

◆ Oct. 29, 9 – 10:30 a.m.

◆ Nov. 5, 9 – 10:30 a.m.

◆ Nov. 19, 9 – 10:30 a.m.

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

◆ Oct. 14, 9 – 11 a.m.

◆ Nov. 16, 1 – 3 p.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:

◆ Oct. 26, 5 – 7 p.m.

◆ Nov. 23, 1 – 3 p.m.

— Informed Childbirth: Learn techniques to help you breathe more efficiently when in labor. Class dates:

◆ Oct. 26, 2 – 4 p.m., Nursing Conference

Room, 4th Floor, GLWACH

◆ Nov. 2, 2 – 4 p.m.

◆ Nov. 19, 5:30 – 7:30 p.m., MEDDAC Classroom 1st Floor, GLWACH

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

◆ Nov. 13, 1 – 2 p.m., Judge Advocate General office, Building 315, call 596-0626 to sign up.

— 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:

◆ Nov. 2, 1:30 – 3 p.m., MEDDAC Classroom at GLWACH

◆ Nov. 16, 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 pregnant and post partum Soldiers Army wide. Class date:

◆ Oct. 27, 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:

◆ Oct. 28, 1 – 3 p.m.

◆ Nov. 4, 1 – 3 p.m.

◆ Nov. 18, 1 – 3 p.m.

◆ Nov. 25, 1 – 3 p.m.

— Sleep Remedies: Can't sleep? Sick of counting sheep? Try our new Sleep Remedies Class to get your zzzz's. Class date:

◆ Oct. 30, 9 – 11 a.m.

◆ Nov. 9, 1 – 3 p.m.

— Tobacco Cessation Class: Discuss tobacco use, skills to quit and coping strategies to remain tobacco free. Class dates:

◆ Nov. 3, 9 – 11 a.m.

◆ Nov. 17, 9 – 11 a.m.