

PACIFIC PULSE

6 Immunizations What you should know

INCREASE YOUR
CHANCES TO ADVANCE

EAP

FROM FEP
TO FIT

A Sailor Transformation Story

Sailor
Spotlight
HM2 Kinlare

Also In This Issue...

- 4DX: Scorecards
- Department In the Spotlight
- Red Cross Volunteer

Need a Healthy
Recipe for Dinner?
LOOK INSIDE!



Pacific Pulse

Pacific Pulse
Official Publication of U.S. Naval Hospital Guam
Vol. 1 Issue 2
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Pacific Pulse is a professional publication of U.S. Naval Hospital Guam. Its purpose is to educate readers on hospital missions and programs. This publication will also draw upon the medical departments rich historical legacy to instill a sense of pride and professionalism among the Navy Medical Department community and to enhance reader awareness of the increasing relevance of Navy Medicine in and for our nation's defense.

The opinions and assertions herein are the personal views of the authors and do not necessarily reflect the official views of the U.S. Government, Department of Defense, or the Department of the Navy.

Guidelines for Submissions:

This publication is electronically published monthly. Please contact Jennifer Zingalie at jennifer.zingalie@med.navy.mil for deadline of present issue.

Submission requirements:

Articles should be between 300 to 1000 words and present the active voice.

Photos should be a minimum of 300 dpi (action shots preferred)
NO BADGES

Subjects considered:

Feature articles (shipmates and civilians)
Quality of Care
R&D/Innovations
Missions/Significant Events
Community Outreach



On the cover:

We've changed our name! Thanks to a re-design by graphic artist Marie Rosema who works in USNH Guam Facilities department, we are proud to bring you the permanent name of our publication. However the name is not as new as it may seem as the USNH Guam 1940's newsletter was called *The Pulse*. In the coming months, look for other new additions to the USNH Guam presence or brand as we prepare to move into the new facility sometime this winter.

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On the Web:

Thank you for taking the time to rate and provide us with your comments and suggestions.

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Acting Commanding Officer Capt. Mike McGinnis

Readiness

Shipmates, hafa adai! Hope you all are having a great start to August, one of my favorite months.

Lots happening in the command. One of the biggest is that Christmas came early for our staff. With the new hospital delivery date being pushed back to February, we no longer have the potential conflict of moving in to the new facility over the holiday leave period. That said, there will be significant planning and preparation that will be in full swing over the holiday period to ensure that we're ready for a safe transition to the new hospital.

We've been farewelling a significant number of our heroes as they PCS to their next great adventure including three Directors and many more Department Heads, LPOs, and leaders that have made USNH Guam the outstanding organization that it is today. What's reassuring is that we have equally high caliber staff coming in as relief. Get to know them and give them a big Guam welcome!

Skipper is leading by example as usual and taking some well deserved leave. Hope you all have had a similar opportunity to enjoy vacation time with your family.

August heralds some big birthdays for us in Navy Medicine: August 4th was the 66th birthday for the Medical Service Corps, and August 22 is the 101st birthday for the Dental Corps!

August 6th marks a very personal milestone for USNH Guam. On this date in 1997 our staff engaged in the island-wide rescue effort for survivors of Korean Airlines Flight 801 that crashed in nearby Nimitz Hill. This solemn anniversary is a reminder that we must always be prepared for any disaster. We are a critical element of the island's medical response. Do you know your role if a similar event happened today? We all have a part - know your role and stay ready!

*Got News? Know an outstanding Medical Staff member? Please let us know. If you would like to write a story or you have written a story and would like to have it printed, please send it our way! If you have a story idea for the *months theme*, please let us know. There are two themes for the month of **September- Mental Health and Suicide Awareness**, if you have an article or idea please submit to jennifer.zingalie@med.navy.mil. See inside the front cover for submission guidelines. **Staff--There should be no departmental/association Facebook pages. Questions? Please use the email in this note.***



Acting Executive Officer **Max Cormier**

Jointness

Greetings from the Acting Executive Officer's desk. What a privilege it is to have a ring-side seat to the great happenings around the Command. Let me mention just a few.

Though challenged by staffing gaps due to the recent PCS of some of our dear Shipmates and several high-level inspections that have occurred, you have remained focused on those patients and family members who place their trust in you. And their trust has been rewarded as evidenced by many of the quality and productivity metrics as well as the high marks received from the Med IG, The Joint Commission, the FDA, and several other agencies. Great job!

As we look around our spaces, we see many new staff members. To those of you who have recently joined our family, welcome; you have landed in paradise both from a location and career standpoint. I think that in the minds of many, Guam is still a sleepy outpost in the western Pacific but that is changing as the word gets out about the unique clinical and administrative opportunities here.

Indeed, the island is in the most beautiful part of the world with some of the nicest and most accessible beaches but it is far from a sleepy assignment for many. You will find your work here to be challenging, stimulating, and rewarding. I have recently extended for a fourth year on Guam and can't say enough about the island, the citizens, the patients, and the dedicated professionals who are fortunate to call Guam home, if

only temporarily. I sincerely hope that you have a similarly great experience.

I had the honor recently of joining the Medical Service Corps Officers as they celebrated their 66th year of service. As you know, the MSC community comprises a wide variety of specialties and we are fortunate to have a collection of the Navy's most talented and dedicated MSC officers in our midst. Happy Birthday, Shipmates.

The Acting Commanding Officer recently sent out the very good news that several of our Lieutenants were selected to the rank of Lieutenant Commander. Please take the time to congratulate our new LCDRs on their highly competitive selection.

Finally, HM1 Bunying (Radiology) and HM1 Glauber (CCC) were both selected for Chief. Bravo Zulu to them for achieving this career milestone.

Have another great Navy day!



Command Master Chief Robert Burton

Value

This month I want to discuss preparations or preparedness.

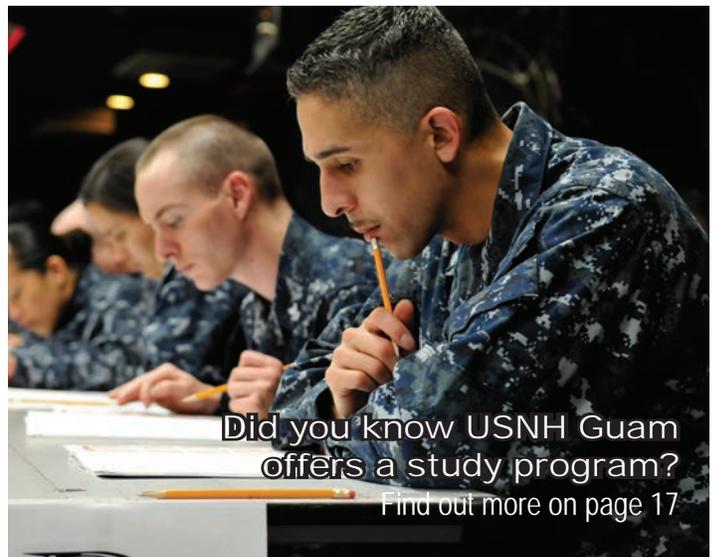
Summer is coming to an end and we have a lot of things taking up our time. School is about to start so children need school supplies and clothing. We recently had a typhoon drill to prepare for typhoon season. We are one month from the September Navy Wide Advancement exam. While August is immunizations preparedness month.

“being unprepared is worse than the effort to prepare”

The list never seems to end. However, being unprepared is worse than the effort to prepare. The task can seem daunting until we put forth the effort to start and break it into chunks. A review of my home supplies revealed I needed some non-perishable food stuffs. Candles and water containers were good. If you need to get something for your home typhoon kit, best to identify it now and get the item on a regular run to the store. After a storm has been identified and a change in conditions is set is not the

time to identify what you need. By the time you get to the store many items will be gone or selection will be greatly reduced.

A broader view of our preparedness goes to things such as health check-ups, finances, legal matters, insurance and post Navy job qualifications. Some of these seem daunting tasks, address issues we don't want to consider (I.e. wills) or issues we don't know enough about (i.e. finances) so we delay. However this will not resolve the issue. To this issue I am reminded that the hardest part is getting started. So figure out an issue you need to address and get started. Pick the easiest one first. When it is done, take a deep breath, figure out the next item and start date. You will be glad you did.



Did you know USNH Guam offers a study program?

Find out more on page 17

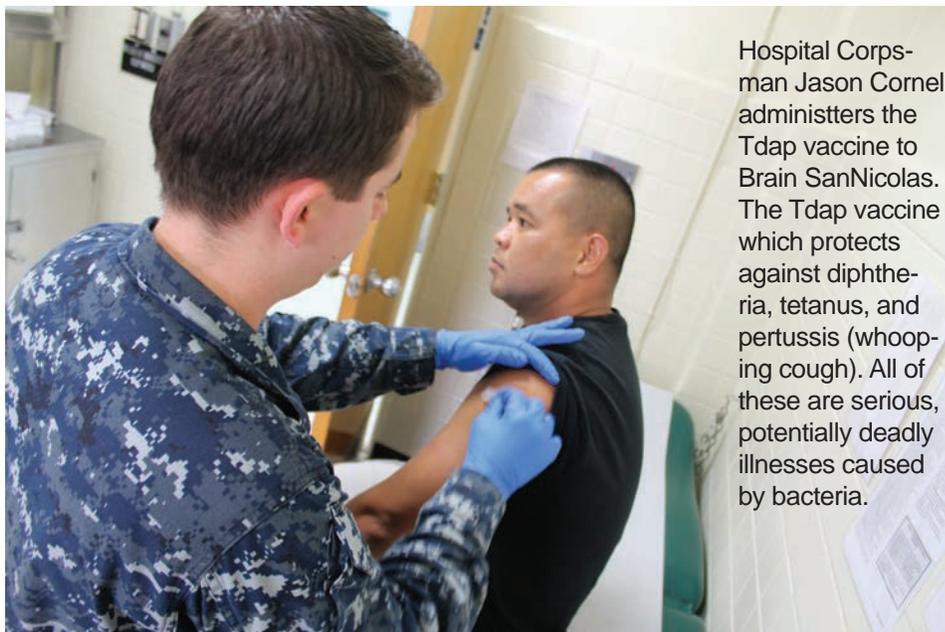
Immunizations

what you should know

Did you know that the words vaccine and immunization are not the same? A vaccine is used to prevent a serious disease while immunization refers to the process by which a person becomes immune to disease. This can happen through a vaccine or by becoming infected with a disease.

Diseases can be acquired through spreading from person to person, by eating contaminated foods or water or from an infected bug bite. For military members a disease can also be spread as a hostile threat associated with biological warfare. Because Navy Medicine is in the readiness business vaccinations are important to keep members safe. Vaccinations are also provided to members and their families to support their health wherever their orders may take them.

According to USNH Guam Immunizations Department, lead nurse, Monika Foster vaccines have helped to nearly eradicate diseases such as polio. In the military active duty members have been spared from anthrax because they receive



Hospital Corpsman Jason Cornell administers the Tdap vaccine to Brain SanNicolas. The Tdap vaccine which protects against diphtheria, tetanus, and pertussis (whooping cough). All of these are serious, potentially deadly illnesses caused by bacteria.

the vaccination before they deploy. One of the more recent diseases that can adversely affect children is whooping cough, that can be passed from adults to infants.

When it comes to vaccines, there is a huge assortment and not everyone will get the same vaccines. Active duty members have specific vaccines they must receive, while children under age two will have different requirements every year until the age of 12.

Whether a vaccine is 'live' or 'inactive' makes the biggest difference in who can receive the vaccine. Women who are pregnant or one month following cannot receive the Measles Mumps and Rubella (MMR) or chicken pox vaccine because they contain live viruses. People with certain medical conditions such as seizures or allergies also cannot receive certain vaccines. "Another example, is people who are on certain medications or have asthma cannot be given the flu mist vaccine, that is taken within a person's nostril," said Foster.

Because of this, Foster emphasized the importance of people keeping updated records. "For Reservists who may only use medical when they are active duty, it is very important that they keep their immunizations records updated and on hand when coming to the hospital. Keeping records in one spot and bringing them every time

Vaccines played a major role in protecting U.S. forces against crippling and deadly diseases through the major wars of the 19th and 20th centuries, to the current U.S. Global War on Terrorism.

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Taking a deeper look has always been this corpsman's expertise of sorts. Yet for this former mortgage underwriter, it became less about numbers and more about passion. "I used to analyze peoples credit, tax returns and the like. I just had to get out of it. It was too much sitting at a computer for me, it just got old. I wanted to go into the healthcare field, I felt the Navy offered the best deal all around," said Hospital Corpsman Second Class Petty Officer Wade Kinlaw IV of U.S. Naval Hospital Guam's Radiology Department.

Making the decision to join the Navy was a huge leap for Kinlaw who joined at an older age and was leaving behind a six-year career in banking. "When I joined I didn't know anything about the Navy and wasn't sure what to expect. I soon discovered the military is diverse in people and thinking. It has grown and modernized and it is a lot more than I expected."

It may be that time and experience were on Kinlaw's side as his grade point average in Corps School provided him the C school (specialty school) of choice and lead him into his current field. The choice was simple, X-Ray Technologist, which according to him, is one of the most sought after schools amongst Corpsmen. "I love my job in the Navy, I disliked my job at the bank-it was like a manufacturing plant, even though each customer is different, it is the same thing over and over," said Kinlaw.

As an X-Ray Tech on any given day Kinlaw could be doing such things as performing X-rays, computerized axial tomographic examinations (CAT scans), operating room radiography, assisting the Radiologist with fluoroscopic examinations and or performing portable radiography in various departments within the hospital.

He doesn't stop there however, Kinlaw has also taken on several collateral duties because he said he feels the Navy has invested so much in him and he wants to reinvest. "Here I have an obligation to exercise and take care of myself, the Navy takes care of me and cares about my well being and encourages me to take care of myself as a

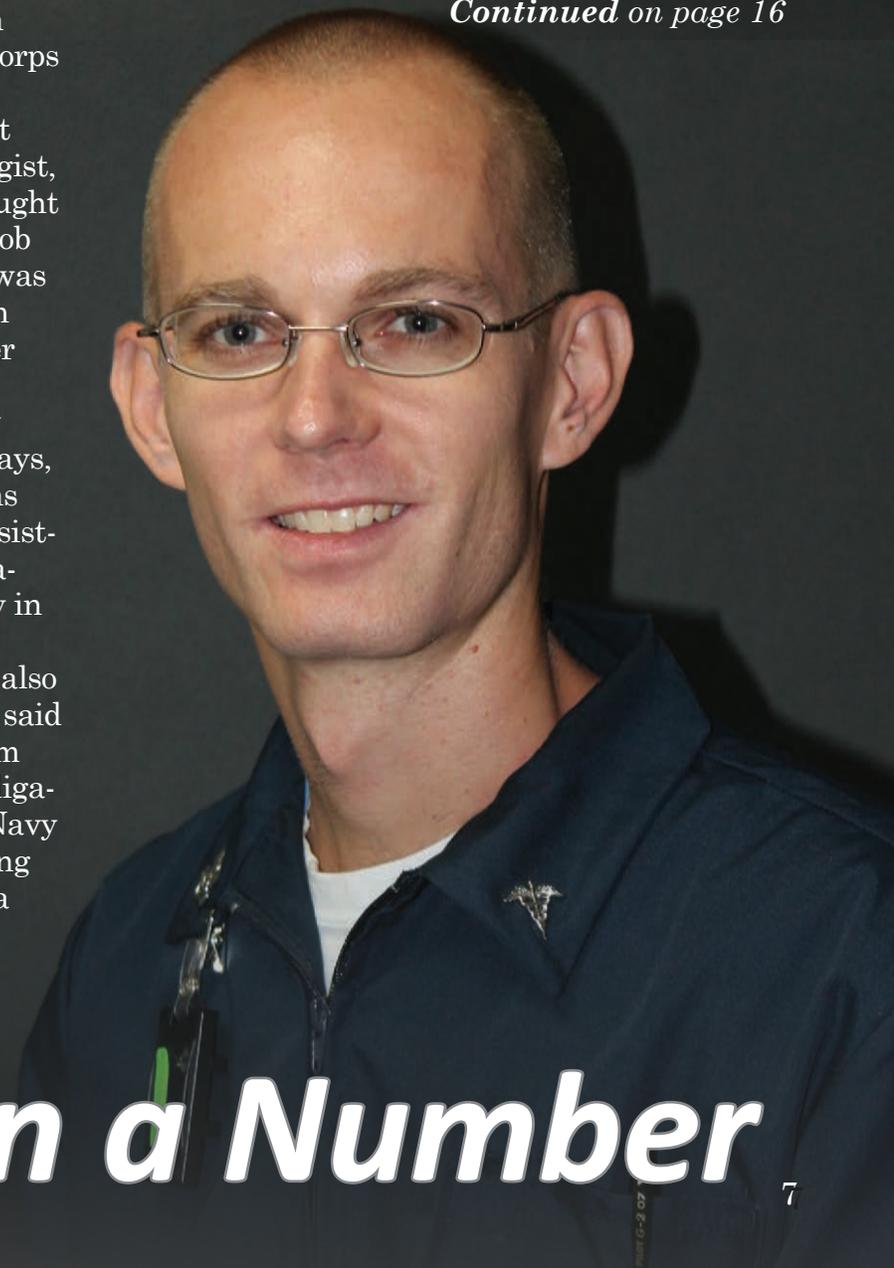
whole," he said.

He went on to say, "On the outside often it is a numbers game, if you are a salesmen, how many sales did you make? If you are an underwriter, how many loans did you approve or deny?"

And although in the Navy we also rely on numbers, so to speak, we do so from a more well-rounded perspective. I am an X-Ray tech but I am also a fitness leader, a drug-free social worker, an advancement facilitator, and help other Sailors work on their advancement. I have so many hats that I take off and put on and play so many different roles."

Although Kinlaw isn't about numbers he was also recently recognized for impacting the lives of up to 300 juveniles as he lead the Campaign Drug Free Flagship under the Navy Community Service Program. These young people are enrolled in the Juvenile Drug Court, a program

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HM2 Kinlaw:

More than a Number



American
Red Cross

Volunteer profile

Name: Donna Pate

Hometown: Birmingham, Alabama

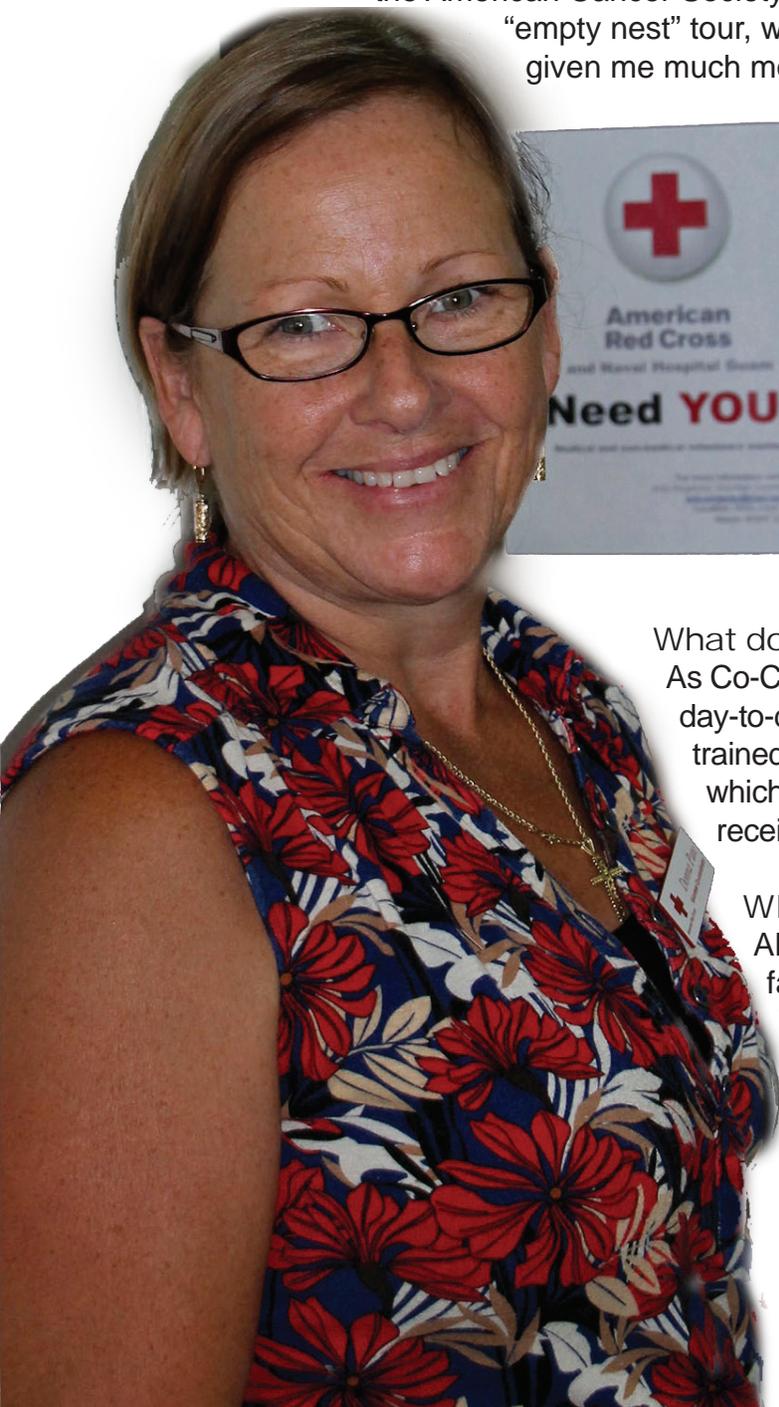
Status: ARC Co-Coordinator

Where else in the world have you lived?

I grew up in Birmingham, AL, and since becoming a Navy wife, have lived in Groton, CT, Bethesda, MD, Woodstock, GA, Okinawa, Japan, Suffolk, VA and Guam.

When did you first know you wanted to be a Red Cross Volunteer?

I have always had a passion for volunteering, and have volunteered with, among other organizations, the American Cancer Society and the USO. The move to Guam has been our “empty nest” tour, with all three of our kids living in the states. That has given me much more time to focus on the things I love. The opportunity to help build the American Red Cross Volunteer Program at USNH Guam is not only a privilege, but also a “dream job.”



What do you love most about volunteering?

While I love the idea of making an impact on the Guam community, I’m also very excited to be working with so many dedicated volunteers. We have an outstanding grassroots team with a wide range of backgrounds and talents, and all of them are eager to do what they can to make the USNH Guam program a top volunteer program.

What does a day of volunteering include for you?

As Co-Coordinator, I assist Coordinator Jody Sergienko in the day-to-day recruiting and managing of volunteers. I am also trained as a Services to the Armed Forces (SAF) volunteer, which involves follow-up with service personnel who have received American Red Cross emergency messages.

What is on your ipod?

ABBA, Barry White, Casting Crowns, Eddy Arnold (a fave of my dad’s!), Herb Alpert, Jonathan Coulton, The Monkees (my secret shame...), Matchbox 20, Maino, Rascall Flatts, Queen...that’s a sampling of the oddity that is my iPod. My favorite song on my iPod is Neil Diamond’s “Sweet Caroline,” because it makes me think of my youngest daughter, Laura, who lives and breathes the Boston Red Sox.



***The American Red Cross:
learn how to prevent and
treat heat stroke in dogs,
especially in warm weather.***

Heat stroke (hyperthermia) occurs when a dog severely overheats. The good news is if the heat stroke hasn't advanced too far (with body temperature of more than 104° F), you can help your dog recover.

It is important to know if your dog is predisposed to heat stroke, which is true of dogs with short snouts such as bulldogs, pugs and many other breeds. Other common causes of heat stroke include: a previous episode of heat stroke, leaving a dog in a parked car, excessive exercise in hot, humid weather, lack of appropriate shelter outdoors, thick-coated dogs in warm weather and underlying disease such as upper airway, heart or lung disease.

Never Leave Your Pet in the Car

In nice weather you may be tempted to take your pet with you in the car while you travel

or do errands. But during warm weather, the inside of your car can reach 120 degrees in a matter of minutes, even if you're parked in the shade. This can mean real trouble for your companion animals left in the car.

If you do happen to see a pet alone in a car during hot weather, alert the management of the store where the car is parked. If the owner does not return promptly, call local animal control or the police department immediately.

Don't Put Your Pet in the Back of a Truck

It is very dangerous, and in some states illegal, to drive with a dog in the back of a pick-up truck. Not only can flying debris cause serious injury, but a dog may be unintentionally thrown into traffic if the driver suddenly hits the brakes, swerves or is hit by another car. Dogs should ride either in the cab (in a crate or wearing a seat belt harness designed for dogs) or in a secured crate in the bed of the truck.

Recognizing the Signs of a

Heat Stroke

Signs and symptoms of heat stroke include: collapse, body temperature 104° F or above, bloody diarrhea or vomit, depression stupor, seizures or coma, excessive panting or difficulty breathing, increased heart rate, salivation.

If you suspect heat stroke:

- Get your dog out of direct heat
- Check for shock
- Take your dog's temperature
- Spray your dog with cool water then retake temperature
- Place water – soaked towels on the dog's head, neck feet, chest and abdomen, turn on a fan and point it in your dog's direction, rub Isopropyl alcohol (70%) on the dog's foot pads to help cool him but don't use large quantities as it can be toxic if ingested
- Take your dog to the nearest veterinary hospital

Learn more by going to: <http://www.red-cross.org/prepare/disaster/pet-safety>

Religious Specialist First
Class Petty Officer John
Dillard prepares the hospital
Chapel for religious services.



Chaplain

Chaplains have been a part of the Navy since the Continental Congress' adoption of the Rules for the Regulation of the Navy of the United Colonies of North America. Article 2 of these rules stated: "The commanders of the ships of the 13 United Colonies are to take care that divine service be performed twice a day on board, and a sermon preached on Sundays, unless bad weather or other extraordinary accidents prevent it." Since then, Chaplains serve as moral, ethical and spiritual advisors to their commanders, ensure free exercise of religion, and oversee the religious programs.

In a hospital setting, alongside doctors, nurses and mental health experts who address the body, the Chaplain is there to address the soul.

U.S. Naval Hospital Guam has two Chaplains, Lt. Cmdr. John M. Thomson Protestant Chaplain and Father Thomas McGrath Roman Catholic Chaplain. Both are specially trained to work in a hospital setting through the Navy's fully accredited Pastoral Care Residency, Navy Chaplain Clinical Pastoral Education Program. This 12-month intensive pastoral training provides experience and knowledge in areas of trauma, crisis and stress which are ac-

quired through combat and traumatic events. They are also trained in dealing with patients and physicians well being.

According to Thomson, "Stepping into a patients room, although this is something doctors and nurses get used to, our training can help break down the barriers that can cause anxiety or doubt because you never know what you are stepping into."

McGrath agreed and added, "During our training we have very intense sessions that can bring up our issues. But, you have to build up resilience, and that is for the patients good, so

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that when you step into that room you are fully focused on them.”

McGrath, who is also a hospice Chaplain for another location on Guam, understands the importance of resiliency all too well. At USNH Guam, a large percentage of its patient population is retirees, which results in a high number of deaths. He also sees a higher percentage of patients because many of the patients are Roman Catholic.

“The main thing I hear is, ‘you were there’ so that means presence. Many times we say nothing but we are there ready to help -or some social things you can do, get a handkerchief, look for a word that might be said to help people quickly get into the healing or grieving process,” said McGrath.

The Chaplains also play a crucial role in mental health said Thomson. “For example, the doctors were having a hard time pin-pointing what was happening with one suicide patient and called me in. When I spent some time with the patient I discovered there were some family tensions that triggered this reaction and was able to provide information that was instrumental to this person’s care.”

“Unlike the Mental Health department, I was able to follow the patient over when they were released to mental health care because Chaplains can cross barriers, and we were able to see this person through recovery,” said Thomson.

He also explained that the ability to address mental health as a Chaplain allows full confidentiality to the patient. For some it can help eliminate the stigma some may associate with mental health issues and counseling. In fact, because mental health experts are not always

available in the fleet, Chaplains deal with a high percentage of Sailors dealing with mental health issues.

The USNH Guam Chaplain’s also work with the hospitals suicide prevention coordinator, Chief Hospital Corpsman Sharon Calmese, providing information and training for the community to include the Department of Defense Education Activity high school, its sister villages, and also tenant commands in Guam.

At USNH Guam the Chaplains also work with staff specifically addressing Combat and Operational Stress Control (COSC) or psychological wellness. One of the things they do is have regular visits with departments such as the Emergency Department, to empower them to defuse stress. They also facilitate a course for Sailors known as BEARINGS which teaches Sailors self-awareness, strategies for success, wellness and professional relationships. In addition, they provide support for families through marriage counseling, events and religious activities.

Thomson is also a certified Myers-Briggs Type Indicator® (MBTI®) assessor which is used to assess the personality types for staff who volunteer for the assessment. The purpose is to help them become more self-aware as well as learn to better interact with various personalities. It also serves in helping staff recognize different stages of personal growth and development.

“With Myers Brigg, we have gone to the different departments to try and build teamwork and leadership skills,” said Thomson.

The Chaplain Office is also responsible for the coordination of the hospitals volunteer efforts. The purpose of the volunteer program is

to support outreach activities for active duty and encourage family involvement as well. The volunteer programs include the American Red Cross, The five Flagships and sister villages and also Navy Associations and various miscel-

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Spiritual Fitness Guide

FIT	STRESSED	DEPLETED	DRAINED
Potential Indicators	Potential Indicators	Potential Indicators	Potential Indicators
<ul style="list-style-type: none"> > Engaged in life’s meaning/purpose > Hopeful about life/future > Makes sound moral decisions > Fully engaged with family, friends, and community > Able to forgive self and others > Respectful of others > Engaged in core values/beliefs 	<ul style="list-style-type: none"> > Neglecting life’s meaning/purpose > Less hopeful about life/future > Makes some poor moral decisions > Somewhat engaged with family, friends, and community > Difficulty forgiving self or others > Less respectful of others > Straying from core values/beliefs 	<ul style="list-style-type: none"> > Losing a sense of life’s meaning/purpose > Holds very little hope about life/future > Makes poor moral decisions routinely > Weakly engaged with family, friends, and community > Not likely to forgive self or others > Strong disrespect for others > Disregards core values/beliefs 	<ul style="list-style-type: none"> > Feels like life has no meaning/purpose > Holds no hope about life/future > Engaged in extreme immoral behavior > Not engaged with family, friends or community > Forgiveness is not an option > Complete disrespect for others > Abandoned core values/beliefs

Inches lost: 6

Navy Standard, 33% body fat (female)

before FEP 38%

after FEP 30%.

Time frame: roughly 4 months



From FEP to Fit

Erica Wayerski's transformation story

When Hospital Corpsman Erica Wayerski, who works in U.S. Naval Hospital Guam's Operating Room decided to join the Navy, she knew she was going to have to lose weight. Working out became her full time job. After completing bootcamp one thing led to another and she found the weight had slowly crept back. Eventually she was required to participate in the Navy's Fitness Enhancement Program (FEP). This program provides both physical fitness activities and nutritional awareness for Sailors not meeting Navy fitness standards. Starting out Wayerski's only motivation was to get off of FEP, but slowly it began to grow into something more.

Exercise: Finding Motivation

In the beginning she felt results were slow going and although she had mandatory Physical Training (PT) 5 times a week, Wayerski felt like it wasn't enough and would sometimes work out twice a day. "I started doing INSANITY (combines cardio, strength and plyometrics) DVD's for awhile. I got through a month; I think that helped me at first.

There were times I didn't want to do it, but I was like 'I can't get off my schedule'."

She also found adding variety to her fitness regimen was helpful. "I got into cycling; I really like the classes on the big Navy. I look forward to when the hospital offers it. With spinning there is a feeling, when you are done, you are dog tired, and you're sweaty but you still feel good," she said.

Because of Guam's tropical climate, she would also run on the base or swim at the pool. "When you get done with a workout you want to feel that excitement knowing that you had a good workout," she said.

Keeping up physical fitness is not always easy. "There were times I really pushed through even when I didn't want to, I knew I could not-not do it. It's definitely a lot of mental strength. It can be

continued on next page



Favorite motivational saying:

“Saying ‘Oh, I’ve already ruined my good eating today. I’ll just eat crap’ is like saying ‘Oh, I dropped my phone on the floor. I’ll just smash it til it breaks.’”



Tip #1--Be Mindful:

“The best way to control your eating in the beginning is to pay attention to what you’re eating in the first place, start a food and exercise journal (or an electronic version such as myfitnesspal or loseit”



Tip #2--Make it a **Habit:**

“It’s always hard in the beginning to form new habits like going to the gym 3 times a week, but if you enjoy what you’re doing it doesn’t seem bad.”



Tip #3--Set Goals:

“I’ve learned I’m most successful when I have a deadline and goal set in place. Even if it’s as small as “working out for at least 30 minutes today.”

hard to get the motivation, especially when you have to wake up early to go PT,” she said.

Yet, Wayerski found motivation in various places from the people she trained with, to Social Media. “I would go on Pinterest and see a lot of workouts on there. There is a lot of stuff on there, they have motivational pictures--I have a board on there just full of motivational posts,” she said.

kitchen but a larger bedroom which provided space for working out at home which she found helpful.

Once she had her own kitchen, she began to prepare a week’s worth of meals on the weekend. This helped her eliminate the temptation of vending machines or buying treats at the mini-NEX located in the hospital. She also committed to buying only what she needed at the grocery store, as well as being more

conscious of what she bought.

“When I have those urges for a snack and go to look for it and it is not there then I find something healthy to eat. I realize when I need groceries I have to buy them at the right place where I can get the fresh whole foods,” Wayerski explained.

She has also been more conscious of how she went about changing her eating habits. “In the past I would make drastic food changes but not this time.

Eating: No yo-yo Dieting

Aside from PT, she also had other obstacles to face such as not having a kitchen in her barracks room. “I just had a small refrigerator and a microwave, so if I wanted to cook something I had to take all of my kitchen items down to another building to access a kitchen. I would do that occasionally but it became a chore to try and do that every day,” she said. Eventually she was able to move to a different barracks that not only had a

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With the drastic approach the excitement fades away quickly. I realized you have to compromise you can't just completely eliminate things. You want to enjoy eating since it is such a big part of our lives--you don't want to dread eating, that is a bad feeling."

Although conquering food in the home may have gotten simpler, she also had to overcome times at work or going out to eat when temptations could be at their strongest. "One of our nurses loves baking and brings in the most amazing cupcakes. I learned if I ignore them, by the afternoon they are gone. We have had pizza parties and I commit to only having one slice or I go to the galley and just try to eat a salad," she said.

When she heads to a restaurant, she tries to make healthy choices and has acquired a taste for veggies burgers. Wayerski also knows Guam is an excellent travel hub. This has helped encourage her not to eat out as much so she can save her money for a hiking trip to New Zealand.

Along with friends and trainers, Wayerski also has found assistance in technology and uses a phone app called *MyFitnessPal* which tracks a person's activities and calories. According to her the app allows her to scan barcodes on foods which help her input calories or protein eaten on a given day. "If you go out to a restaurant you can search the restaurant as well as what you order. I remember using it one time and going to a popular restaurant and typing in what I ate and finding out it was 1000 calories!" She exclaimed.

Putting it all together and sharing the "wealth"

Ultimately, her hard work and dedication paid off, not only has she lost weight and passed her Navy Physical Readiness Test (PRT), but she was recently approached by USNH Guam Materials Management Chief Supply Specialist, Angel Mamanta, who is also the PRT coordinator, about becoming an Assistant Command Fitness Leader (ACFL).

"I want to be an ACFL because I feel like I can really relate to people that are currently on FEP. I was exactly where they are, not too long ago, and it's validating being able to help others reach their goals," she said.

Along with helping others, she is also keeping up her own fitness goals. Her newest goal is to enter her first 5K, which she knows are plentiful on Guam. "Running is not necessarily a strong point for me, so for me to enter a race would be a big deal," she said.

What started out as a motivation to get off the FEP program has led to her commitment to the program and to herself. "Since I've started becoming more active I feel like so many more opportunities are open to me. I enjoy going on hikes, meeting up with friends at yoga, going to a cycling class and not being intimidated by biking 20+ miles at one time, or even running with a friend around the track and motivating each other to run that extra lap or cut 10 seconds off their mile pace. I can't wait for the next opportunity to present itself," said Wayerski.

What's on Wayerski's iPod playlist?

"Let's Get it Started" - The Black Eyed Peas

"Good Feeling" -Flo Rida

"Stronger (What Doesn't Kill You) -Kelly Clarkson

"Eye of the Tiger" -Survivor

"Marry the Night" - Lady GaGa

"Fame" - Naturi Naughton (from the movie soundtrack)

"Kids" -MGMT

continued on next page

Workout regimen

Mon:	Tue/Thurs:	Fri:	Sat:
MOR Dept PT at 0500	Yoga	Command PT at 0530 Gym/run in the PM	Hike or gym/run Sun: gym/run





Makes 8 servings
 Per Serving: 210 calories, 18 g protein, 17 g carbohydrates, 7 g fat, 2 g saturated, 45 mg cholesterol, 3 g fiber, 340 mg sodium

Wayerski's favorite recipe: Veggie Lasagna

INGREDIENTS

- 2 large zucchini (about 1 pound), ends trimmed, thinly sliced lengthwise
- 3 links (about 4 ounces each) lean turkey Italian sausage
- 1 red bell pepper or roasted red bell pepper, diced
- 1 cup diced yellow onion
- 1 teaspoon minced garlic
- 1 cup low-fat marinara sauce
- 2 egg whites
- 1 (15-ounce) container fat-free ricotta cheese
- 2 teaspoons Italian seasoning
- 1/2 teaspoon ground black pepper
- 2/3 cup shredded low-fat mozzarella cheese
- 1/4 cup grated Parmesan cheese

INSTRUCTIONS

1. Preheat the oven to 325°F. Lightly coat an 8" x 8" baking pan with olive oil cooking spray. Set aside.
2. Lightly spray a baking sheet with olive oil cooking spray. Arrange the zucchini slices in a single layer on the baking sheet. Spray them lightly with cooking spray. Broil (or grill) the zucchini for about 8 minutes, or until tender and very lightly browned. Set aside to cool.
3. To prepare the meat sauce, cook the sausage in a nonstick skillet over medium-high heat for about 3 minutes, stirring occasionally with a wooden spoon to break up any clumps. Add the bell pepper, onion and garlic, and cook for about 4 minutes longer, until the meat is no longer pink. The juices should be cooked dry. Stir in the marinara sauce and bring to a boil. Reduce the heat and simmer for about 5 minutes, stirring frequently. The sauce will be very thick.
4. Meanwhile, in a mixing bowl, combine egg whites, ricotta, Italian seasoning and black pepper until well combined.
5. To assemble the lasagna, spread half of the meat sauce in the bottom of the prepared baking pan. Layer on half of the zucchini slices, followed by half of the ricotta mixture and half of the mozzarella cheese. Repeat with the remaining meat sauce, zucchini slices, ricotta mixture and mozzarella. Sprinkle with Parmesan cheese. Bake for about 40 minutes, or until bubbly and lightly browned. Let stand for 5 minutes before serving.

“I’ve learned a lot on my journey and I continue to learn more every day. There are so many ways to get active from taking a walk around the block, to playing a sport, to weight training, the list is endless.”

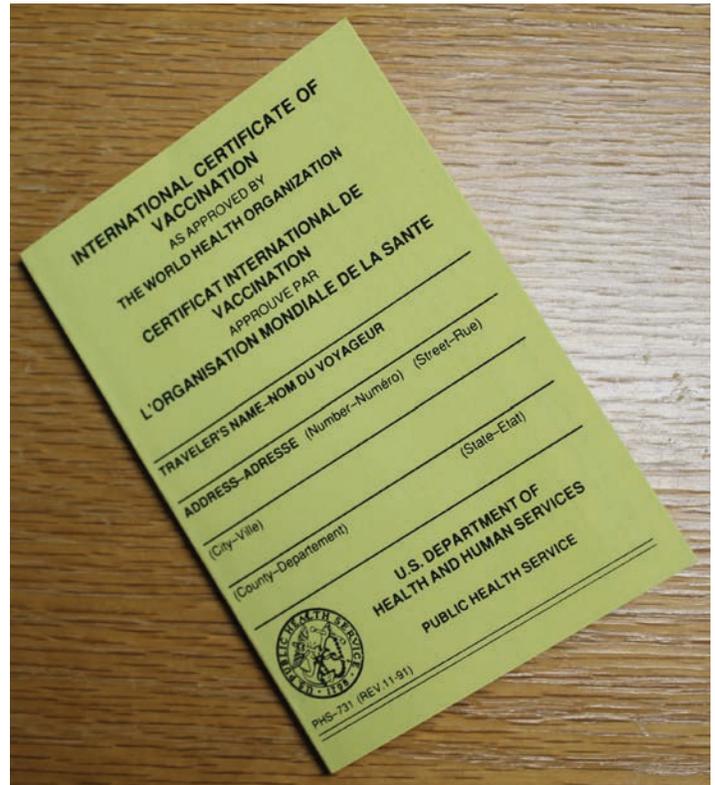


“Always have a long term goal. Take pride in small hurdles. Reward yourself after losing that first 10 pounds by buying new work out gear. NEVER treat yourself with food, that’s not a reward, that’s a step back.”



Connect with Erica on her “Motivation” Pinterest board:
<http://pinterest.com/wayerskierica/motivation/>

More than 850,000 people have been vaccinated against smallpox since the DoD began the program in December 2002. In a similar intense surveillance program, it was DoD physicians and scientists who alerted America to a rare cardiac condition occurring in the second week after smallpox vaccination. DoD collaborated with federal agencies and state health departments to get the job done.



they come in,” explained Foster.

She also explained even though active duty records are done electronically, many electronic records were not started until 2007. Because of this it is important active duty and their families maintain and know what vaccines are in their medical records as well.

According to Foster it is also important to sign up through the Military Vaccine Agency (MIL-VAX) <http://www.vaccines.mil/> to get on the list that updates patients if any immunizations have been recalled. Vaccines should be treated no differently than medications and patients should ask about them, what they are and why they are receiving it. It is also for the benefit of the person administering the vaccine. “if I as the nurse don’t understand what and why you are getting it you shouldn’t be getting it and it is important that as a patient you ask questions,” she said.

Those who have had adverse affects from a vaccination should report it through the Vaccine Adverse Event Reporting System (VEARS) at <http://vaers.hhs.gov/index>. This is a national vaccine surveillance program co-sponsored by the Centers for Disease Control and Prevention and the Food and Drug Administration. It serves to collect information on adverse events or side effects that occur after a person has been vaccinated from a properly licensed health care provider.

Those who are in Guam or have orders to Guam should ensure they are up to date on their Tuberculosis (TB) test as it is a prevalent disease on the island. This is due to a large volume of travelers. Students who are coming from the states entering DoDEA schools will be required to receive a series of the Hepatitis A vaccine before they can enter school. **What do you know? Complete the crossword puzzle on pg 22 to find out.**

Those who may not have access to the U.S. Naval Hospital all the time will be issued a vaccine record book like the one above. USNH Guam Lead Immunization Nurse Monka Foster recommends patients be diligent in keeping their records updated and having them available at all times.

Kinlaw continued from page 7

of the Guam government to provide assistance to youth identified as having problems with alcohol and/or drugs.

“Before the Navy I was never a part of social work and now I am able to help people. It changes your attitude and your long-term perspectives and goals. This is the sort of thing I will end up doing for life,” he explained.

Through his experiences Kinlaw has gained a better understanding of what he wants. At one point he was considering Health Care Administration as a career but laid it aside to study for an advancement exam which saw him put on Second Class Petty Officer in May. During this time he was able to observe the Health Care Administration field and came to a realization that although administration and finance may be his strong points they are not his passion.

He soon began looking into the Nurse Corps.”It has the patient contact and interaction with people. Going into nursing I feel like I will be more fulfilled.”

Across the Navy enlisted personnel participate in advancement exams, which along with passing fitness scores, and outstanding evaluations, provide them the opportunity to advance to the next rank. Although Sailors will spend time in study and preparation, in Navy Medicine this is something that is mandated and is known by U.S. Naval Hospital Guam's Hospital Corpsmen as the Enlisted Advancement Program (EAP).

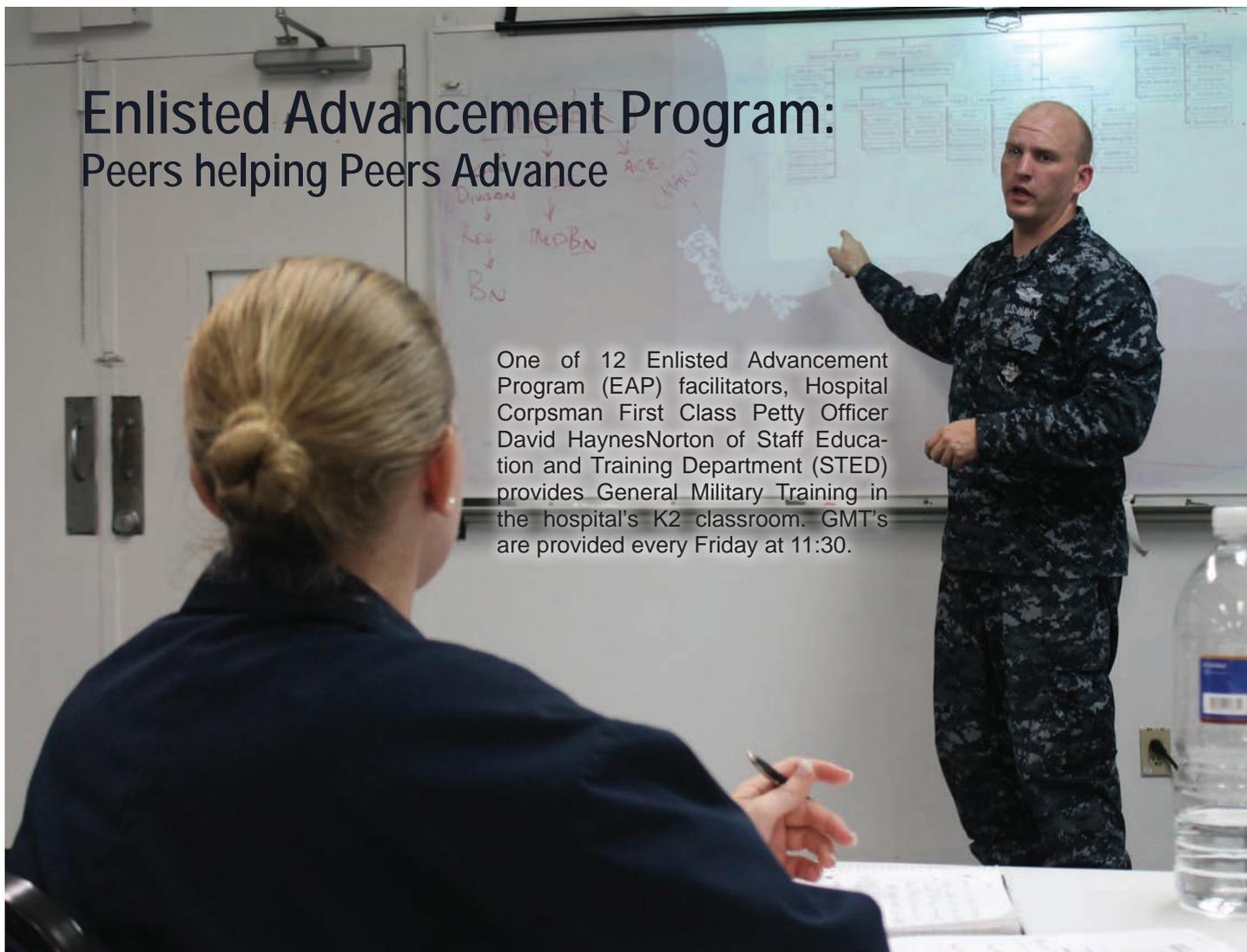
According to Hospital Corpsman First Class Petty Officer David HaynesNorton of Staff Education and Training Department (STED), the idea is that the Navy Hospital Corpsman (HM) training manual was designed to take a person from the lower enlisted ranks to the upper enlisted ranks. "Studying makes you better at your job, a better clinic worker, a better administrative worker, and helps you understand other people's jobs," he said. "Once you have a base knowledge of your job then you can start

helping other people."

HaynesNorton serves as a facilitator for the program, which is typically held every day at 11:30 a.m. in the hospital's K2 classroom. When he first arrived at the hospital, he was a Third Class Petty Officer. Because he worked in the training department, he was responsible for running the projector and computer during each of the EAP classes. "I wound up sitting through every class and then I ended up picking up Second Class Petty Officer, I did really well on the test. I was there every single day and heard all the presentations," he said.

Shortly after that, he began teaching the classes and two years later he advanced to First Class Petty Officer. According to Hospital Corpsman Second Class Petty Officer, Wade Kinlaw of Radiology, who now runs the program and is also facilitator, USNH Guam

continued on page 17



Enlisted Advancement Program: Peers helping Peers Advance

One of 12 Enlisted Advancement Program (EAP) facilitators, Hospital Corpsman First Class Petty Officer David HaynesNorton of Staff Education and Training Department (STED) provides General Military Training in the hospital's K2 classroom. GMT's are provided every Friday at 11:30.

has been able to identify the benefits to those who attend the EAP program. “Those looking to advance scored on average, up to five points higher than those who did not attend the program,” he said.

Said HaynesNorton, “Every time I have taken the test I have recognized something because of attending the EAP class--People say they are not good at test taking, I believe if you know the information you can be good.”

Although the program is designed for Hospital Corpsman they also cover General Military Training on Friday’s as well as teach test taking skills. During the program the facilitators go through the HM Training manual twice and the Navy Bibliography that includes other study requirements at least once and strive to hit on the major topics twice.

“We give 30 minutes of information on a topic. You can’t cover everything, especially when you are talking about things like preventative medicine but we can hit major topics. Of course it is up to the individual to really get the fine details out of that,” said HaynesNorton.

The EAP facilitators also try and get subject matter experts involved in topic training. For example, if there is a lab chapter a person from the lab will be invited to come and talk to the group. Said HaynesNorton, “there often is a difference between policy and practice, so we ask the facilitators to stick with the training manual but relate it to the different departments within the hospital.”

The EAP instructors also take time to instruct or facilitate the individual or departmental study groups throughout the hospital. “The facilitators really care. I believe ‘if you like it you’re good at it, if your good at it you like it’ and the people that teach are those that really love talking about their job and sharing their knowledge,” said HaynesNorton.

Although he is an advocate of the EAP program he also understands it is only a part of advancement. “We can give numbers, dates, timeframes, and so on but the knowledge is going to come from an individual studying,” he said. “However, the people that want to study and study on their own will also attend EAP.”



**SMART PHONE? Smart Corpsman.
Study on the go with Moblie flash cards.
Information comes from NAVTRA 14295B**

USNHG STUDY STATISTICS

On the E-4 test, the average test score was 51.81 points for those who went to EAP and the average for those who didn't go was 48.95 points. Of those that went to EAP there was an average gain of 5.7 points between their last two tests.

On the E-5 test the average for those that went to EAP was 56.73 points. The average for those who did not go was 48.98 points and of those that went to EAP there was an average gain of 3 points between their last two tests.

EAP Corpsman training Sessions are held Monday through Thursday at 11:30 a.m. in the hospitals K2 classroom (unless otherwise indicated). Friday includes all rates for General Military Training instruction. All are encouraged to attend.

What's Your SWIG?

Patients who have been to the hospital lately or happened down one of the units wings may have noticed scoreboards hanging on the walls.

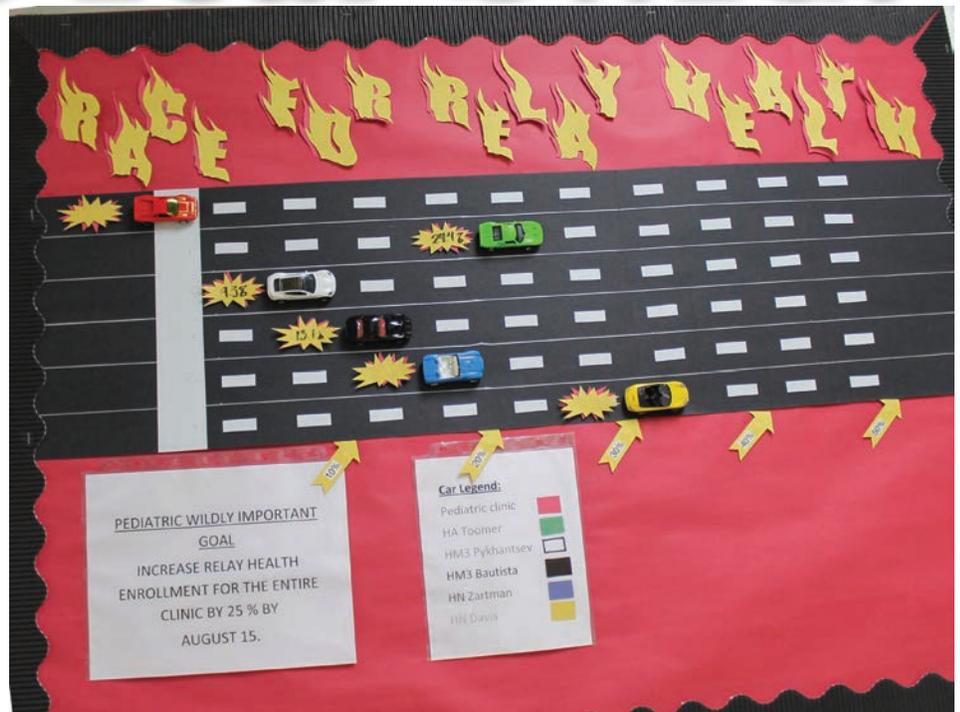
Recently, U.S. Naval Hospital Guam renewed their Wildly Important Goal or WIG, which is to “enrich the patient’s experience of care”. Like most organizations, the point of the WIG is to move toward the commands vision, which for USNH Guam is to “lead Navy Medicine in patient centered care.”

The concept is derived from the book *The 4 Disciplines of Execution* which provides a proven set of practices to assist organizations in executing their business strategy in a balanced, priority-based way. The scoreboards are Discipline three of the book.

Although all of USNH Guam staff is essentially part of the same team, each department or division plays a unique role in realizing the WIG. Because of this each department or division must have their own goal, known as a Sub-Wildly Important Goal or SWIG.

Basically, the larger USNH Guam team is broken down into smaller, departmental or divisional teams, whether they are the Pediatrics Team or the Facilities Team. Each team then has a SWIG and scoreboard. For example, Family Medicines SWIG is to “improve comment card submissions.”

“As with all goal directed groups, each member has to know if they are winning



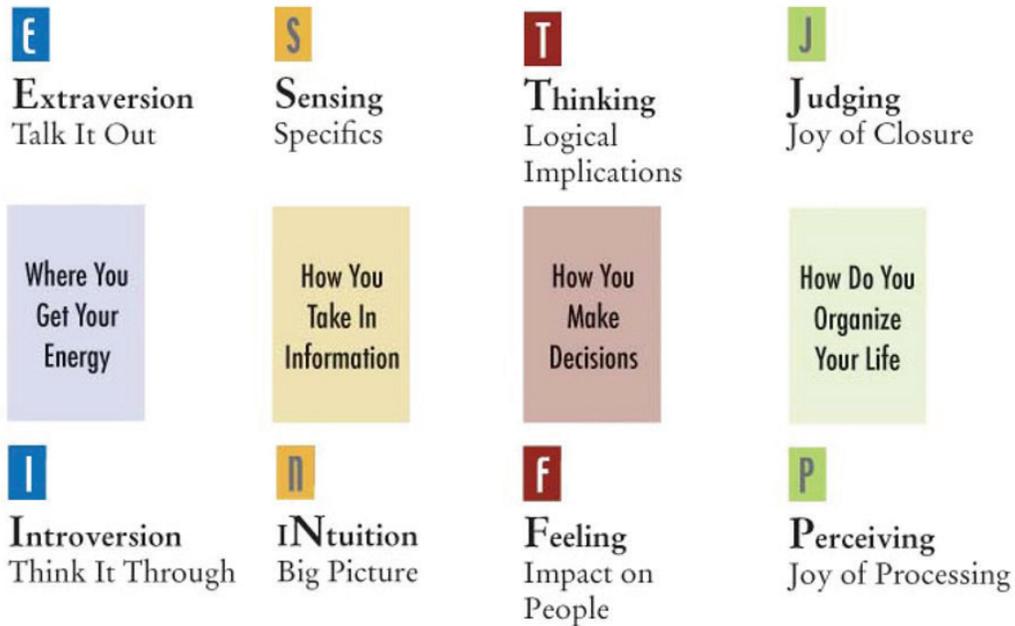
“Pediatrics start your engines!” Seen above is the Pediatrics Department Scoreboard. Their Sub-Wildly Important Goal (SWIG) is to increase Relay Health enrollment for the entire clinic by 25% by August 15. The purpose of their goal is to support USNH Guam’s over-arching goal or Wildly Important Goal (WIG) of “enriching the patient’s experience of care” over the next year. Throughout the hospital patients will notice different scoreboards within each department, each with SWIGS personalized to that department. Patients who are curious may want to ask staff two questions, “what is your SWIG?” and “are you winning?” Or they can look for the scoreboard located in the department to see for themselves.

or losing; are they gaining ground on their objective?” said Cmdr. Max Cormier of USNH Guam’s Quality Management Department and Lead E-Coach, (the ‘e’ standing for execution in relation to business strategy).

For individual staff members, the scoreboard allows them to identify the team’s productivity and also provides a means for them to become more self-aware, understanding what personal behaviors they need to strengthen to help their team achieve the SWIG. This can include better time management, enhanced communication or setting

short term personal goals. Achieving these things is what Stephen Covey, in his book *The 7 Habits of Highly Effective People*, calls “private victories.”

The ultimate goal of every scoreboard is to not only to make a positive impact on the overall score, but also to show the high value of each team member. Said Cormier, “The scoreboard should be visible and compelling. It must quickly tell the observer what the goal is and where the team is in relation to meeting that goal”. Because of this, patients are encouraged to ask staff, “What is your department SWIG?” Let the games begin!



Know thyself: 16 Personality types

As seen above the sixteen personality types of the Myers-Briggs Type Indicator® instrument are listed here as they are often shown in what is called a “type table.” The goal of knowing about personality type is to understand and appreciate differences between people. As all types are equal, there is no best type.

USNH Guam Chaplain, Cmdr. John Thomson is a certified Myers-Briggs Type Indicator® assessor. Why is this important? In health care when health care professionals understand personality type they have more resources for providing quality service to patients and their families. With a knowledge of the framework of the sixteen types, health care providers can adjust communication and create appropriate care programs that best suit the patient.

Personality type can assist in many ways including learning how to be flexible with patients, understanding their reactions to disease, appreciating how they experience stress, determining patient compliance with protocols, and knowing how best to deliver challenging medical news.

Since the Myers-Briggs Type Indicator® is a psychological assessment, it is restricted to use by certified professionals. To take the test from someone other than Thomson may cost a small fee to take the MBTI assessment which may vary 20

provides the assessment.

Those who wish to use the online option can do so by going to www.MBTIComplete.com and signing up for an account to complete the assessment.

Other Chaplain Services Women’s Bible Study -

Every 2nd and 4th Saturday at 9 a.m. in the hospital Executive Board Room.

Men’s Bible Study -

Every Tuesday morning at 6 a.m. at the Hospital galley.

Protestant Services -
U.S. Naval Hospital Chapel, 2nd deck
Thursday’s at 5 p.m.

Resource: *Health Care Communication Using Personality Type: Patients Are Different!* by Judy Allen and Susan A. Brock (Routledge 2000)



Hospital Corpsman, Third Class Petty Officer Maryann Hopkins prepares the hospital Chapel for religious services.

Chaplain continued from page 10

laneous groups.

Typically, where you find a Chaplain, a Religious Specialist will be at his or her side. At USNH Guam, that person can be seen on any given day about the hospital with a cooler full of water that he hands out to staff. Religious Specialist, First Class Petty Officer John Dillard, serves as the Chaplains go to person as well as provides administrative and logistical support for services. He also has special financial training in order to track and ensure financial support for the needs of the religious programs. If ever there was a need, he is also trained in combat and would serve as a body guard to the Chaplain.

Currently, USNH Guam Chaplains Office has Hospital Corpsman, Third Class Petty Officer Maryann Hopkins. Thomson appreciates having a corpsman in the office who serves well as a liaison between medical staff and the Chaplain's office in relaying patient messages. "During a recent emergency situation, having HM3 was a great asset." She also helps with administrative functions as well as to set up for religious services.

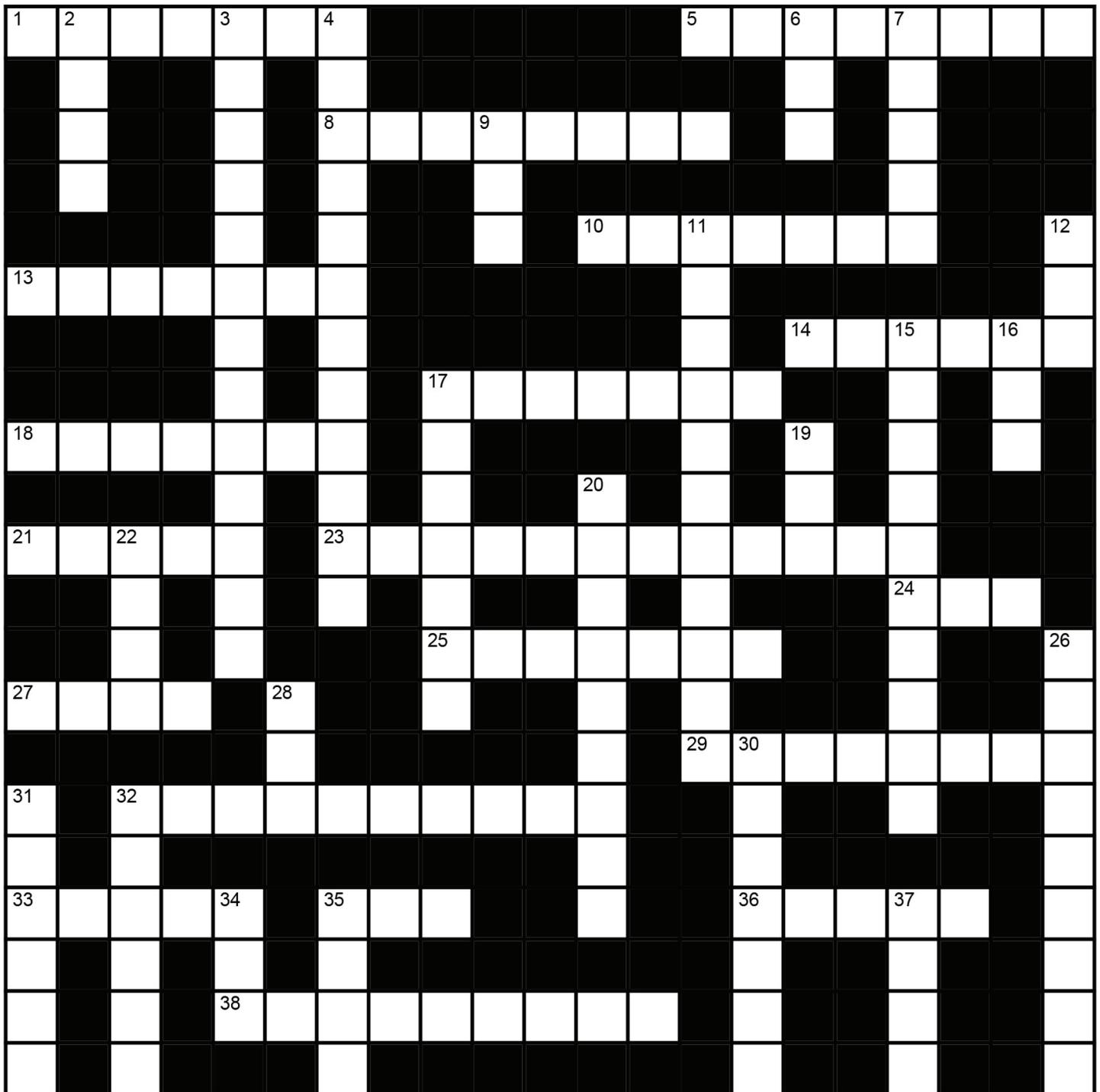
Together Dillard and Hopkins provide Chaplains the means to communicate with floors and locate areas to set up families during times of crisis.

In a recent poll on Navy Personnel Command's website, 63 percent of 5,049 respondents *did not* believe that what they say to a chaplain is confidential, and 65 percent of 2,895 respondents believe that Navy chaplains *are required* to report certain matters to the command.

Per SECNAV Instruction 1730.9 service members and families have the ***right and privilege*** to ***confidential communication*** with a Navy chaplain; Chaplains have the obligation and responsibility to ***protect and guard*** the confidential communications disclosed to them; and commanders honor and support the unique, confidential relationship between an individual and a chaplain. Chaplains cannot be compelled by the command, medical professionals or others to disclose what a service member or family member shares in confidence.

Why We Screen Before Vaccination

www.vaccines.mil



created by the military vaccine agency

Across

1. Persons with this disease history should not receive smallpox (7)
5. Component added to vaccine to enhance immune response (8)
8. Common injection site reaction (8) TST placed soon after this live vaccine may cause a false-negative (7)
10. TST placed soon after this live vaccine may cause a false-negative (7)
13. Flu vaccine contraindicated in immunosuppressed persons (7)
14. Vaccine recommended by ACIP for individuals 60 years and older (6)
17. Children on this long term therapy should not receive FluMist (7)
18. Additional dose of immunizing agent weeks or years after initial dose (7)
21. Indicated for children to prevent viral paralytic disease (5)
23. Recommended vaccine for smokers 18 yrs and older (12)
24. Do not vaccinate persons severely allergic to this YF vaccine component (3)
25. Vaccine stabilizer in MMR , an excipient (7)
27. Vaccine type contraindicated for pregnant women (4)
29. Vaccine contraindicated in breastfeeding mothers (8)
32. Vaccine component that may cause allergic reaction, i.e. MSG (10)
33. Recommended age for first dose of Hep B (5)
35. Vaccine recommended for female adolescents, abbr. (3)
36. Brief but severe symptoms; synm. (5)
38. Encephalopathy after this vaccine contraindicates a second dose (9)

Down

2. Recommends immunizations requirements, grp (4)
3. Prevents infections of common preventable diseases (13)
4. Suboptimal antibody response after vaccination may occur in persons undergoing this therapy (12)
6. Indicated for individuals traveling to rural areas in Asia during mosquito season (3)
7. Vaccine Adverse Event Reporting System; abbr. (5)
9. Influenza vaccine recommended for immunocompromised persons; abbr (3)
11. This type of medication to treat infection is not a contraindication for vaccination (11)
12. Thrombocytopenia is a precaution for administration of this vaccine (3)
15. Persons with this disease should receive pneumococcal vaccine every five yrs (10)
16. Anaphylaxis antidote; abbr. (3)
17. Common word for hypersensitivity (7)
19. Organization to report vaccine preventable disease; abbr. (3)
20. Chronic gastrointestinal disease in children is a precaution for which vaccine (9)
22. Healthy nonpregnant persons under age 50 can receive this influenza vaccine (4)
26. Earliest age influenza vaccine may be administered (9)
28. Vaccine is recommended for asplenic adolescents (3)
30. Lethargy after vaccination (7) Vaccine indicated for individuals who work with animal population (6)
31. Vaccine indicated for individuals who work with animal population (6)
32. Check for contraindications (6)
34. Group of individuals who may transmit influenza to high risk persons, abbr. (3)
35. A large vaccinated group results in this type of immunity (4)
37. Indicated for new parents to prevent spread of whooping cough (4)