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Pacific Pulse

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Surgeon General of the Navy
Chief, BUMED
Vice Adm. Matthew L. Nathan

Deputy Surgeon General
Deputy Chief, BUMED
Rear Adm. C. Forrest Faison, III

Force Master Chief
FORCM (SS/SW/FMF) Sherman E. Boss

Commanding Officer Naval Hospital Guam
Capt. Jeannie B. Comlish

Executive Officer Naval Hospital Guam
Capt. Mike McGinnis

Command Master Chief
Naval Hospital Guam
Robert Burton

Public Affairs Officer
Jennifer M. Zingalie-Goulart
jennifer.zingalie@med.navy.mil

Pacific Pulse is a professional publication of U.S. Naval Hospital Guam. It's 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 assertations herein are the personal views of the authors and do not neccessarily 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:

U.S. Naval Hospital Guam held a change of command ceremony in the hospital's atrium, June 27th. During the ceremony Capt. Jeannie B. Comlish assumed command of the hospital from Capt. Jeffrey M. Plummer, marking the end of two years of command for Plummer. Comlish comes to Naval Hospital from Naval Hospital Oak Harbor where she served as Executive Officer.

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

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Commanding Officer
Capt. Jeannie Comlish

Readiness

Hafa Adai and thank you Naval Hospital Guam Team for the extremely warm welcome my family and I have received since our arrival! As I walk around this beautiful new hospital building, I am struck by the professionalism and dedication of all the staff. It is clear to me that everyone has actively pursued relationships which foster success and ensure safe, quality care is delivered. You are a highly functional team, and together we will continue on this path to being recognized, not only for leading Navy Medicine in quality patient care and providing a wonderful patient experience, but as a high reliability organization.

What an amazing month to be on Guam! We celebrated our nation's 238th birthday on July 4th. Imagine thirteen original states coming together to fight for their collective freedom and be declared a new nation. Our young country has been founded on great teamwork.

On July 21st, Guam will celebrate another independence day. In December 1941 the island was invaded by the Japanese, all military personnel and US citizens were captured. The hospital was overrun and five Navy nurses, including Chief Nurse LT (jg) Marian Olds, LT (jg) Leona Jackson, ENS Lorraine Christiansen, ENS Virginia Fogarty and ENS Doris Yetter, were taken to Japan as prisoners of war. Approximately six months later, the nurses were returned to the mainland United States while the male staff endured the entire war in POW camps in Japan. One of the nurses, LT Leona Jackson, NC, USN, returned to Guam as chief nurse in 1944 and director of the Navy Nurse Corps in 1954.

On July 21, 1944 the US Military united with the people of Guam and fought with courage to liberate this pacific island devastated by war. More than 1800 American Service members were killed in that campaign and nearly 1200 local residents died during the occupation. Their acts of bravery and patriotism strengthened the bond between the military and local community, and today we are able to unite in celebration of Guam's Liberation. The new hospital patient rooms overlook Asan Beach--the location of the Marines' landing to take back the island. Today these views are that of healing, but serve as a reminder of the price paid for freedom. Liberation Day is the celebration of the strength and courage of Americans both uniformed and civilian. It is an honor to share this important day in history with all of you and to be a member of this great community and fabulous team!

Executive Officer
Capt. Mike McGinnis

Value

Hafa adai Shipmates! It's been a great summer so far and many of you are taking hard earned leave. As we do so, we're focusing on doing it smartly and safely, taking home the message from our recent alcohol stand down, putting in appropriate safe guards for ourselves and intervening on the behalf of our friends.

Speaking of safety, we continue to build on this theme as we sharpen focus on our command's Wildly Important Goal – enhancing the patient's experience of care. Our three supporting battles are patient safety, staff development, and business excellence. We are actively planning staff development opportunities for the second half of the year, stay tuned as we look to bring Navy Medicine and civilian subject matter experts here to train us.

Our battle of business excellence includes many of the goals of Medical Home Port, including delivering on our commitment for access to care, continuity between provider and patient, and quality of care delivered. One aspect of quality will continue to be our Navy Medicine leading execution of preventive health services to our beneficiaries.

Medical Home Port is highlighted in this issue, take time to read about the great services we provide. One service that we will develop further is Relay Health. This is an electronic means for patients to message with their health care team, ask questions, request appointments and get lab results. Our primary care teams will look to increase Relay Health enrollment and utilization in the upcoming months. With Relay Health, it's possible to deliver quality care to the patient at home. This convenient communication keeps us in touch with our patients during the 'white space' between clinic visits. Relay Health can be a useful tool in making our patients informed stewards of their own health care.

Thank you for all of the hard work you do on behalf of our patients and our command! I look forward to working with you at the deckplate to take U.S. Naval Hospital Guam to the next level.

V/R,
XO

Command Master Chief
Robert Burton

Jointness

Change is something that is constant. Since joining the Navy, I have witnessed a lot of change. Drinking, driving and alcohol related incidents are no exception. My own views on how much alcohol is acceptable in your system when you drive has changed, namely since early 2007.

As a CMC in Atsugi Japan, I made the mistake of driving to the base a few hours after consuming a small amount of alcohol. Upon arrival NAF Atsugi gate, I got to present my ID card and blow into an alcohol detection device. Not knowing if any alcohol remained in my system and considering I was risking financial penalties, an immediate end to my naval career under a dark cloud and notoriety on Navy Times, brought about an epiphany.

Over the next few days I developed my policy on drinking and vehicular operation. That no alcohol in the system was an acceptable amount was easy, but how to ensure that amount. There is the rule of thumb of one drink per hour. However, you get into keeping track of number drinks; time consumed, body weight, metabolism and how much alcohol was in the drink. To complicate the math, your decision process is impaired by the alcohol you are trying to calculate. After much thought, I decided that it was best to not depend on fuzzy math. If I have a drink, I will not drive until the next day (meaning sun rise, not 0001). But if I drink several drinks, how do I combat morning after DUI? After some more thought, there seemed only two answers. You can get a portable Breathalyzer and hope it is celebrated and working properly. Although not full proof, the method is far better than fuzzy math. The second option--if I consume 4 drinks or more, I don't drive until after 1800 the next day or the morning following. Time is the only thing that will make you sober. Hot coffee and cold showers, a popular old wives tale from the movies, might make you wide awake, but it does not make you sober.

Since implementing this policy it does not bother me to submit a breath sample when asked. In fact I am very happy to do so because I know the answer. When the phone rings after I have had a drink, I know that if someone needs me some place that I will not be driving. There are other ways and you can find them, once you decide which one you are not using. Recently someone had visited my house to pick up something rather than me drive down the hill, as I had consumed one beer.

If you don't have a personnel policy on when is too much for you to drive, or how to ensure you are okay to drive, you are taking a risk of making a bad decision. The results of that decision is financial, criminal and perhaps life threatening of yourself and others.

As a Navy Leader, we have to talk about this on a regular basis. This will not be the last time you hear me talk about it. However the one good thing is, I walk the walk and will see me walking from where I live in Sinajana down to Agana to go out in town from time to time when I choose to consume alcohol in a public establishment.

One more item and that is bystander intervention. Often people will ask someone, "are you okay to drive?" Let me be clear. If you have to ask, or you hear someone ask or you are being asked, the answer is "NO".

Work hard, have fun and play responsibly.

Motorcycle safety is your responsibility.

Motorcycle safety includes ALL two wheel vehicles with a motor.

All military members assigned to Guam, If you ride any two wheel motorized conveyance you are required to wear PPE as directed by OPNAVINST 5100.12J.

This includes, but is not limited to: helmet, gloves, long pants, and long sleeve shirts.

Bright Colors are required for daytime riding. Reflective gear is required for nighttime riding.

Military members riding on motorcycles or scooters, must contact motorcycle safety.

Military members riding on motorcycles or scooters must contact Motorcycle Safety *before* riding!

U.S. NAVAL HOSPITAL GUAM
SERVICE WITH HONOR

Hospital Motorcycle Safety Representatives

HM2 Damian Bertrand – 671-344-9381,
Damian.Bertrand@med.navy.mil

Lt. Mark Peugeot – 671-344-9401,
Mark.Peugeot@med.navy.mil

Most people hope to fall in love. Although it doesn't happen for everyone, it did for Hospital Corpsman 3rd Class Robert Reiser who took a psychology class in high school and knew it was something he would like to pursue. Reiser is currently a Behavioral Health Technician (BHT), working in the Mental Health Department of U.S. Naval Hospital Guam, doing what he loves most--helping people.

"Before I came in the Navy, I had no idea they had mental health or offered mental health support. When I was at my initial Corpsman school I heard people talking about it, and I knew that was a school I wanted, and I feel blessed to have been picked up for it," said Reiser, a Savannah, GA native.

Reiser, and other BHT's like him, are a part of a comprehensive team of psychologists, psychiatrists, psychiatric nurses and social workers that work together on various platforms from hospitals to ships in support of operations. People like Reiser are often the first line of defense for Sailors and Marines seeking help during times of difficulty or crisis.

Most days Reiser interviews patients to get a better understanding of their history and help to steer them in the direction of seeing a psychologist or psychiatrist. Although it can be demanding to hear the difficulties people face, Reiser says he doesn't view their stories as negative but sees their perseverance and their determination and the fact they are alive and are seeking help. "It amazes me how you can go through so much and the brain finds a way to protect you. It is so powerful," he said.

Reiser is also the Leading Petty Officer of the Mental Health department and has the opportunity to lead and mentor other BHT's. "I tell my staff, you aren't just answering phones, you are taking appointments, you are helping the patient get care and to see the provider--you are helping to change their life," he said. "You have to look at the little things because they add up to a bigger picture. Even though we are not directly dealing with the patients we are still contributing to their success and well-being."

Reiser believes although there is a lot more information on mental health and subjects like Post Traumatic Disorder

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Spotlight: Hospital Corpsman 3rd Class Robert Reiser

Lt.Cmdr. Kelly Elmore, a physician who works in U.S. Naval Hospital Guam's Obstetrics and Gynecology (OB/GYN) Department performs a Ceasarean Section which results in the delivery of a healthy baby boy., Ryder Haspalur. (Photo taken byJennifer Zingalie, Public Affairs)

Empowerment through Childbirth Options

There are many different ways to deliver a baby. From the time of conception, until the child leaves the "nest," it would seem mothers have to make many tough choices, all the while wading through mass information. Sometimes it might seem information is contradicting. Other times, the topic may strike a sensitive nerve--with mothers on either side of an issue--natural childbirth being one of those topics.

Lt.Cmdr. Kelly Elmore, a physician who works at U.S. Naval Hospital Guam's Obstetrics and Gynecology (OB/GYN) Department, put it simply when she said natural child birth is allowing the process of labor to take its course. "If you allow your body to labor as it is made to do, it will---it just takes time."

"For a natural experience, it is important for the patient to discuss what they think natural means to them and for us, as medical staff, to be open to helping them with that experience," she said. "It's really about giving women and their significant others, or partners the tools so they can have a natural or empowered birthing experience."

Elmore also said, natural childbirth can include many things: from patient controlled pain medication, to allowing labor to progress without use of medications or breaking the "bag of water," to the ability to move around freely during labor. She explained that one of the most significant aspects of natural child birth is the management of pain which differs with each patient. During labor, some patients may experience pain while others may not even be aware they are in labor. "You have to be mentally and physically prepared for labor, I notice

Continued on page 10

LAMAZE CLASSES & MUCH MORE

SAGUA MAÑAGU
Guam's First Birthing Center

Orientation Class
For parents who choose Sagua Mañagu as their baby's birth place, orientation offers a preview of what to expect. Parents must attend at least once before delivering at Sagua Mañagu and are also encouraged to attend by 36 weeks gestation. No charge

Prenatal Class
Designed to help new parents understand what to expect during pregnancy, this class covers the journey from the positive pregnancy test to the last trimester. No charge

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At Sagua Mañagu, women may choose one of three options for Lamaze.

- Traditional course that is comprised of five weekly 2-hour sessions:
- Custom 2-evening course; or
- Afternoon Crash Course

LAMAZE® Refresher
This refresher course was designed with the experienced parents in mind. This class is for anyone who has had a previous birth experience, whether you have taken Lamaze or not.. $40/couple.*

Sibling Class
Created especially for siblings, their parents and support persons, the class is offered monthly. It is required for all families planning to have their older children present for the labor and birth of the new baby. No charge

Breast Feeding Support Group
This class is weekly. Moms are encouraged to ask questions about the process and share the hurdles and milestones of breastfeeding. No charge

Resolve Through Sharing Support Group aka Bereavement Services
If you or anyone you know experiences a pregnancy loss due to miscarriage, a stillbirth or the loss of their precious newborn, caring support is available by appointment. No charge

For a schedule of the classes, please drop by or call the Nurses' Station at Sagua Mañagu.

Contact information:
Nurses Station: 647-1417 or 1418
saguanursing@saguamanagu-mpg.com

For questions regarding patient registration, billing, and insurance
Patient Affairs: 647-1415
marian.patientaffairs@saguamanagu-mpg.com

For Lamaze, breast feeding support and patient education
Barbara Mafnas, RN: 777-6526
lamazeonguam@yahoo.com

All other inquires, comments and suggestions
info@saguamanagu-mpg.com

access our class schedule on our website:
www.saguamanagu-mpg.com

* Fees subject to change.

Empowerment cont'd from page 8

a lot of people have not taken classes and feel like they will go with the flow, perhaps not realizing that 10 out of 10 pain may be inevitable," she said.

For those who opt out of pain medication or an epidural, other options can be made available such as hydrotherapy, hypnobirthing, yoga or even meditation, which are all techniques Elmore used during her birthing experience.

Elmore feels the more the medical staff can help relieve pain earlier on in labor, whether through breathing techniques, water therapy, or a strong support system, can help ease the labor experience as it progresses. These techniques can help the labor to be more manageable for the patient as the pain increases.

To reduce labor pains, according to a study done by the Center for Disease Control (CDC), approximately 61% of pregnant patients opt for an epidural. For those who choose this option, Elmore recommends waiting until a patient has progressed into active labor which is typically when the cervix is dilated between 5 and 6 centimeters or beyond. "The epidural was never meant to take away 100 percent of your pain, it's meant to reduce the amount of pain you experience, and some patients go all the way down to a zero while others still experience some pain. When a patient gets pain medication too early and the level of pain hasn't reduced as much as a patient may feel it should, they may feel the epidural has failed, but usually it hasn't."

She also explained there can be side effects to receiving the epidural, such as causing a mother's blood pressure to drop. This in turn can cause the baby's blood pressure and heart rate to drop. If the medical staff cannot get the baby's heart rate back up, depending on how close the baby is to delivering vaginally an assisted vaginal or Cesarean delivery may be performed "I haven't seen that happen much

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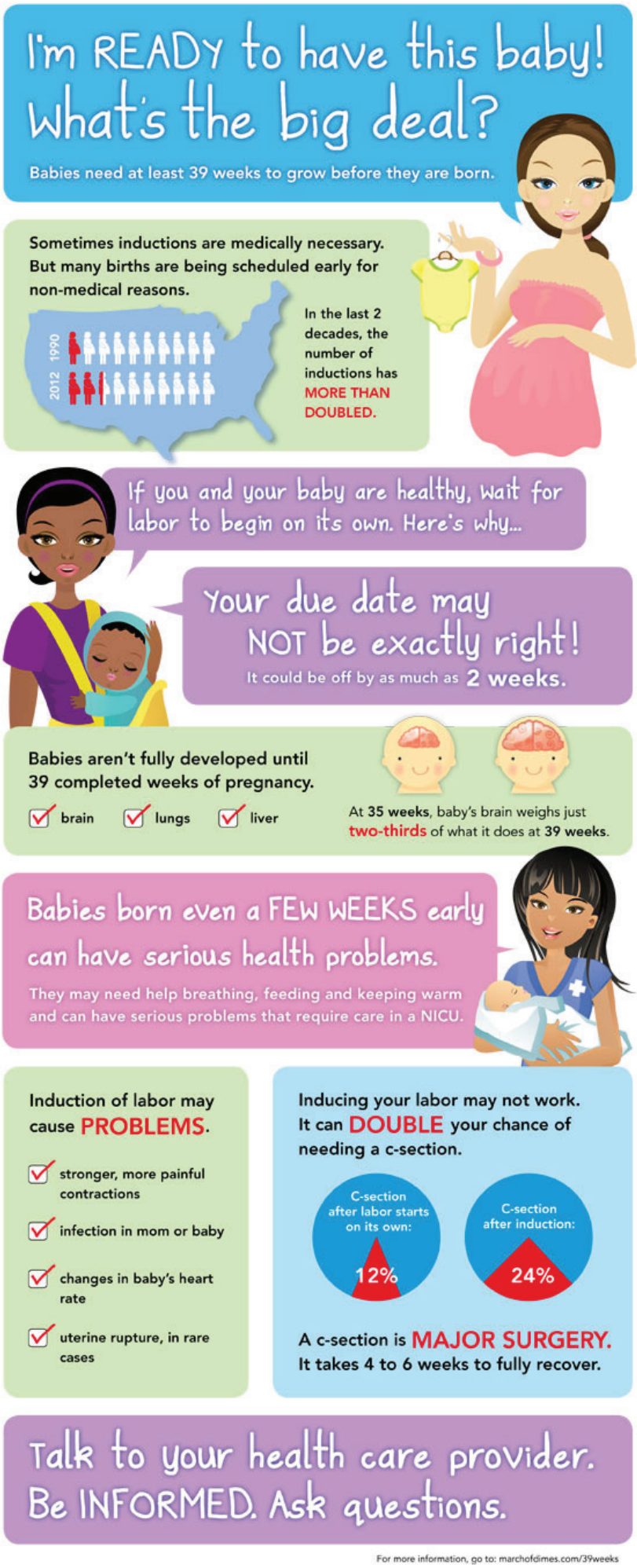

Empowerment cont'd from page 10

here or even throughout my career," said Elmore.

She went on to explain that typically 45 minutes after an epidural is administered there are fluctuations in the heart rate. Because of this the medical staff work to hydrate the mother, prior to the epidural being placed, which helps expand blood volume to help prevent the patients' blood pressure from dropping. Other side effects of an epidural, for some patients, can include pain in their back or legs.

For those who had a prior delivery via Cesarean Section the hospital does counsel and can offer a trial of labor for the patient's second delivery. This service is not offered at every medical facility because it requires a complete operating team to be available for the entirety of labor until delivery. Although there is low risk of having complications, if something were to happen the team would need to move quickly.

However a mother chooses to deliver, Elmore believes a successful natural delivery is when a mother gets to see her choice through. "Whether you didn't want any pain medications, or wanted to wait for your water to break or just wait as long as you could before intervention or, if you had a scheduled Cesarean Section and we put baby to mom during that event, all of that is successful to me—happy parents, crying baby," she said with a smile.

Reiser cont'd from page 7

(PTSD) there may still be stigmas that exist about seeking mental health or some may be concerned about ruining their career if they seek help. However, Reiser said everyone has stress, and at times many people need to ask for help. In these times, he believes asking for help and mental health go hand-in-hand.

According to Reiser it is important to understand that mental health is not the same as mental illness. In fact, mental health is a state of well-being in which an individual realizes their own abilities and can cope with the daily stresses of life.

"Anytime you start noticing a decline in your daily life, like if you used to hang out with friends and now all of a sudden you only want to stay home and sleep, or you notice something in you doesn't feel right that is a good indicator you need to seek help whether it is with the Chaplain, Fleet and Family Services or Mental Health," he said.

Reiser takes his own advice. Whenever he is feeling overwhelmed or stressed he uses deep breathing techniques. He uses many of the tools and resources found on the Navy and Marine Corps Public Health Center website. Ultimately, Reiser knows the importance of building resistance; promoting resilience and aiding in recovery, for the good of his shipmates and readiness of the Navy, not simply because it is his job, but because it is his passion.

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☐ boat.
☐ swim.
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DRINK RESPONSIBLY.
KEEP WHAT YOU'VE EARNED

Sleep.

are you getting enough?

Contributed by the U.S. Naval Hospital Guam Health Promotions Office

References: Reite M, Ruddy J, Nagel K. Concise guide to evaluation and management of sleep disorders (3rd ed). American Psychiatric Publishing, Inc., 2002

While we often consider sleep to be a "passive" activity, sufficient sleep is increasingly being recognized as an essential aspect of health promotion and chronic disease prevention in the public health community.

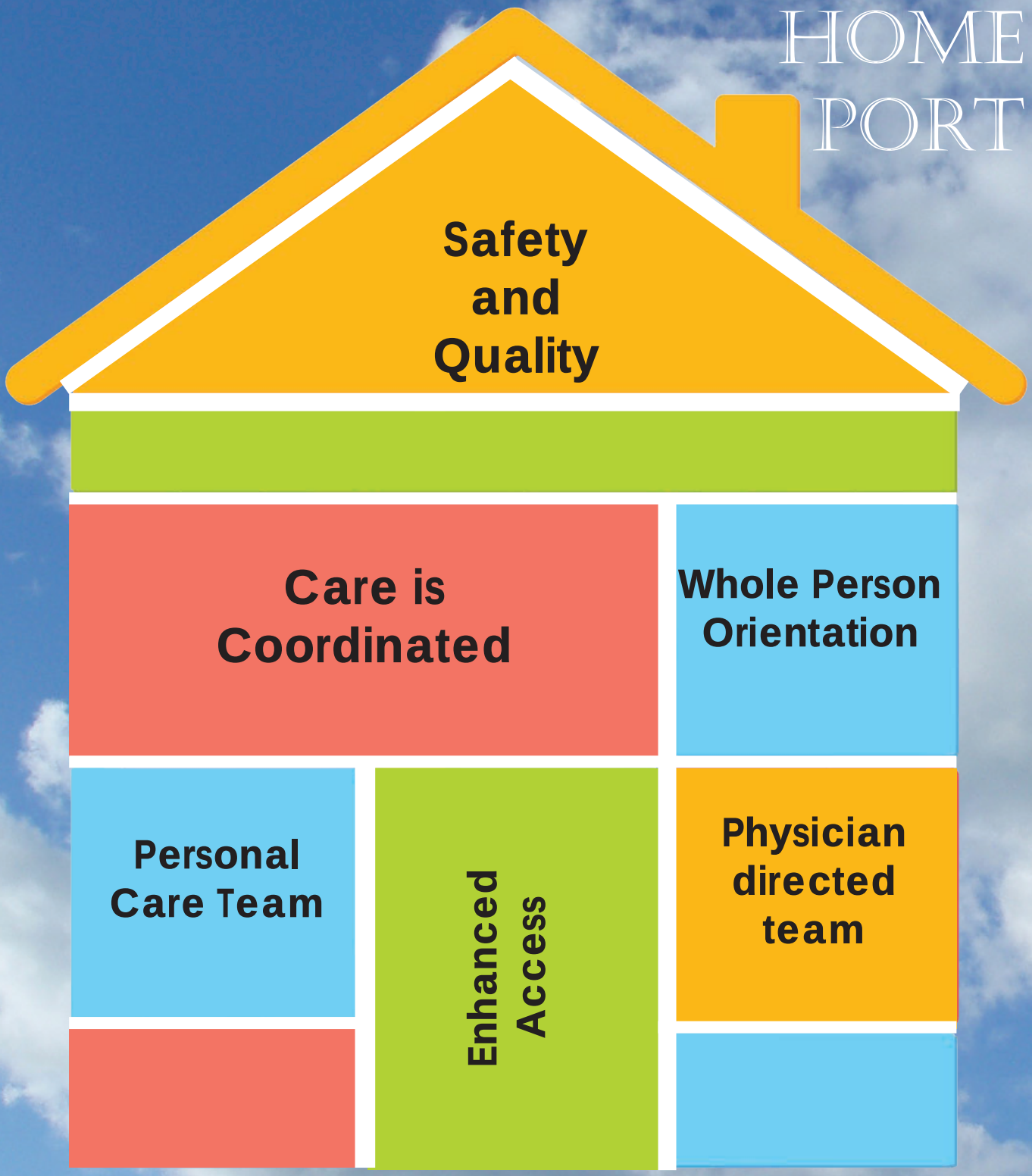
Insufficient sleep is associated with a number of chronic diseases and conditions—such as diabetes, cardiovascular disease, obesity, and depression—which threaten our nation's health. Notably, insufficient sleep is associated with the onset of these diseases and also poses important implications for their management and outcome. Moreover, insufficient sleep is responsible for motor vehicle and machinery-related crashes, causing substantial injury and disability each year. In short, drowsy driving can be as dangerous—and preventable—as driving while intoxicated.

More than one-quarter of the U.S. population report occasionally not getting enough sleep, while nearly 10% experience chronic insomnia. However, new methods for assessing and treating sleep disorders bring hope to the millions suffering from insufficient sleep. Fundamental to the success of all of these efforts is the recognition that sufficient sleep is not a luxury—it is a necessity—and should be thought of as a "vital sign" of good health.

10 Effective Sleep Habits for Everyone

1. Create a quiet, dark, comfortable sleeping environment. Cover windows with darkening drapes or shades (dark trash bags work too) or wear a sleep mask to block light. Minimize disturbance from environmental noises with foam earplugs or use a room fan to muffle noise. If you can, adjust the room temperature to suit you. If you can't,use extra blankets to stay warm. Use that room fan both to muffle noise AND keep you cool.
2. Use the bedroom only for sleep and sex. Remove the TV, computer, laptop, etc. from your bedroom. Don't eat or drink in bed. Keep discussions/arguments out of the bedroom.
3. Stop caffeine at least 6 hours before bedtime. Caffeine promotes wakefulness and disrupts sleep.
4. Don't drink alcohol before bed. Alcohol initially makes you feel sleepy, but disrupts and lightens your sleep several hours later. In short, alcohol reduces the recuperative value of sleep. Nicotine – and withdrawal from nicotine in the middle of the night – also disrupts sleep. If you need help quitting drinking or using nicotine products, see your health-care provider for options.
5. Get your exercise in by early evening. Exercising is great – just be sure to finish at least 3 hours before bedtime so that you have plenty of time to wind down.
6. Don't go to bed hungry. A light bedtime snack (e.g., milk and crackers) can be helpful, but do not eat a large meal close to bedtime. And empty your bladder just before you go to bed so that the urge to urinate doesn't disrupt your sleep.
7. Maintain a consistent, regular routine that starts with a fixed wake-up time. Start by setting a fixed time to wake up, get out of bed, and get exposure to light each day. Pick a time that you can maintain during the week AND onweekends. Then adjust your bedtime so that you target 7—8 hours of sleep.
8. Get out of bed if you can't sleep. Only go to bed (and stay in bed) when you feel sleepy. Do not try to force yourself to fall asleep – it will tend to make you more awake, making the problem worse. If you wake up in the middle of the night, give yourself about 20 minutes to return to sleep. If you do not return to sleep within 20 minutes, get out of bed and do something relaxing. Do not return to bed until you feel sleepy.
9. Nap wisely but sparingly. Napping can be a good way to make up for poor/reduced nighttime sleep, but naps can cause problems falling asleep or staying asleep at night – especially if those naps are longer than 1 hour and/or if they are taken late in the day (after 3 pm) If you need to nap for safety reasons (e.g., driving), try to take a short (30-60 minute) nap in the late morning or early afternoon (e.g., right after lunch), just enough to take the edge off your sleepiness.
10. Move the bedroom clock to where you cannot see it. If you tend to check the clock two or more times during the night, and if you worry that you are not getting enough sleep, cover the clock face or turn it around so that you can't see it (or remove the clock from the bedroom entirely).

Understanding MEDICAL HOME PORT



Be it ever so humble, there is no place like home. It may seem strange to think of a hospital as a home, perhaps even a bit troublesome, but the Medical Home concept is about promoting health, or a term more familirar to the military community as readiness.

Creating an environment that feels like "home" can sometimes be challenging in the military community where the turnover rate is often very high. At the same time the mission of Navy Medicine differs from the private sector in that it is geared toward operational success.

"Our job is to keep the military and their family members ready to do their jobs and when necessary deploy with them at the scene to help them," said Surgeon General of the Navy Vice Adm. Matthew Nathan at the 5th Annual Quality & Safety Forum. "However, in the military we are not rewarded for the care provided, we are rewarded for the health of our patients."

Medical Home Port, as it is known in the Navy, is an innovative way of delivering primary care, placing patients at the center of a team of mediclal staff. This team, consists of a provider, nurses, medical support staff, medical assistants, hospital Corpsmen, nurse educators, and others. They work together to provide comprehensive care to patients, in order to achieve the best outcomes with regards to health and wellness. Ultimately, this means continuity in care, for example, times when an appointment will need to be scheduled, a patient will be ensured to be seen by a provider on their team familiar with their medical history.

At the same time, using the Medical Home Port model allows patients to be seen when it is necessary, but also provides them access to their doctor, when a visit may not be needed, through a secure email system using Relay Health. Relay Health allows a patient the opportunity to ask questions such as '*What do these test results mean*?' or '*What immunizations do I need to get*?' without calling on the phone or having to make an appointment. Its purpose is to answer questions, share information and allow the patient and the care team to build a strong and trusting relationship anytime, anywhere. In its ideal state, according to Nathan, as a Medical Home Port progresses, military patients will even be able to talk directly to a provider after-hours for urgent care that doesn't require an emergency room visit.

With the patient at the center of care, Medical Home Port also allows the primary care provider the ability to address other issues that may be apparent at an acute appointment, such as depression or stress. In turn, it allows the provider to collaborate that same day, if needed, with specialists, such as a psychologist, or other providers that can help contribute to the wellness and health of the patient.

Most importantly, Medical Home Port encourages patients to be proactive in their care, the decision-making process, and self-management while the care team honors the patient and family perspective with dignity and respect. Medical Home Port encourages patients to be educated about each visit, treatment and follow-up care and urges them to ask questions and follow the care plans that are decided upon. It asks patients to keep a list of medications and vitamins with them to share with their care team at each appointment or through Relay Health, and encourages them to write down and bring their questions with them to each appointment. "A patient who participates in their care, and who feels they have a confidence they can participate in their care, is going to have a better outcome," said Nathan.

Staying in touch with your provider just got easier: ***anytime, anywhere***, from any Internet connection. It's easy and secure.

For your non-urgent needs, you may even save yourself an office visit.

No more waiting on-hold for appointments or medication refills. No more talking to people other than your doctor about private matters!

(Click on http://1.usa.gov/VDzzTj or go to the U.S. Naval Hospital Guam website to learn more).

TRICARE Online.com

RelayHealth

Healthy Life

A healthy lifestyle involves many choices. Choosing a balanced diet or healthy eating plan is one of the important choices. So how do you choose a healthy eating plan? Let's begin by defining what a healthy eating plan is. According to the *Dietary Guidelines for Americans* 2010, a healthy eating plan:

- Emphasizes fruits, vegetables, whole grains, and fat-free or low-fat milk and milk products
- Includes lean meats, poultry, fish, beans, eggs, and nuts
- Is low in saturated fats, *trans* fats, cholesterol, salt (sodium), and added sugars
- Stays within your daily calorie needs

Contributed by the U.S. Naval Hospital Guam Health Promotions Office

Eat Healthfully and Enjoy It!

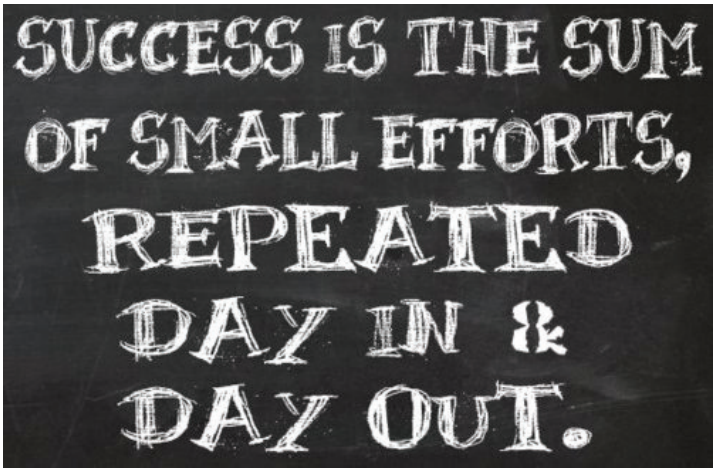
A healthy eating plan that helps you manage your weight includes a variety of foods you may not have considered. If "healthy eating" makes you think about the foods you **can't** have, try refocusing on all the new foods you **can** eat—

- **Fresh fruits** — don't think just apples or bananas. All fresh fruits are great choices. Be sure to try some "exotic" fruits, too. How about a mango? Or a juicy pineapple or kiwi fruit! When your favorite fresh fruits aren't in season, try a frozen, canned, or dried variety of a fresh fruit you enjoy. One caution about canned fruits is that they may contain added sugars or syrups. Be sure and choose canned varieties of fruit packed in water or in their own juice.

- **Fresh vegetables** — try something new. You may find that you love grilled vegetables or steamed vegetables with an herb you haven't tried like rosemary. You can sauté (panfry) vegetables in a non-stick pan with a small amount of cooking spray. Or try frozen or canned vegetables for a quick side dish — just microwave and serve. When trying canned vegetables, look for vegetables without added salt, butter, or cream sauces. Commit to going to the produce department and trying a new vegetable each week.

- **Calcium-rich foods** — you may automatically think of a glass of low-fat or fat-free milk when someone says "eat more dairy products." But what about low-fat and fat-free yogurts without added sugars? These come in a wide variety of flavors and can be a great dessert substitute for those with a sweet tooth.

- **A new twist on an old favorite** — if your favorite recipe calls for frying fish or breaded chicken, try healthier variations using baking or grilling. Maybe even try a recipe that uses dry beans in place of higher-fat meats. Ask around or search the internet and magazines for recipes with fewer calories — you might be surprised to find you have a new favorite dish!



Do I have to give up my favorite comfort food?

No! Healthy eating is all about balance. You can enjoy your favorite foods even if they are high in calories, fat or added sugars. The key is eating them only once in a while, and balancing them out with healthier foods and more physical activity. Some general tips for comfort foods:

- Eat them less often. If you normally eat these foods every day, cut back to once a week or once a month. You'll be cutting your calories because you're not having the food as often.

- Eat smaller amounts. If your favorite higher-calorie food is a chocolate bar, have a smaller size or only half a bar.

- Try a lower-calorie version. Use lower-calorie ingredients or prepare food differently. For example, if your macaroni and cheese recipe uses whole milk, butter, and full-fat cheese, try remaking it with non-fat milk, less butter, light cream cheese, fresh spinach and tomatoes. Just remember to not increase your portion size.

Source: Centers for Disease Control and Prevention 1600 Clifton Rd. Atlanta, GA 30333, USA

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