

Events and Training Calendar

Jan. 1: New Years Day

Jan. 6: Epiphany (German Holiday)

Jan. 6: Landstuhl Annual Training

Jan. 7: Hospital Newcomer's Orientation

Jan. 8: Commander's Award Ceremony

Jan. 8: Class B uniform day

Jan. 13: TeamSTEPPS

Jan. 14: Ice Cream Social, DFAC

Jan. 20: Landstuhl Annual Training

Jan. 21: Hospital Newcomer's Orientation

Jan. 18: Martin Luther King Jr. Day

Jan. 26: MLK Day observance

Jan. 29: BLC Graduation



Frohes Neues Jahr Teamkollegen! Welcome to 2021. 2020 was an unprecedented period for the LRMC team and also one of awakening. From COVID-19 to protests against social injustice and racial inequalities, most of us have processed what we never thought to experience in a lifetime. Yet, the people, combined with the drive to protect and save the lives of the Joint Warfighter and our beneficiary population, has enabled us to overcome and succeed during these tough times.

We achieved excellence in our Triennial Joint Commission Inspection, worked collectively to create a COVID-19 ward, bed expansion plan and COVID isolation barracks to support Combatant Commanders. Lastly, we set the bar high for readiness training across the MEDCOM by implementing a premier medical treatment facility training plan to train and execute Army Warrior Tasks and medical individual critical task lists (ICTLs) ensuring tactical and clinical competence, interoperability and existence as a ready medical force.

Though we aren't out of the pandemic wood yet, don't spend too much time looking back. Set your focus on the future. For 2021, I want you to set personal and organizational goals that will enhance unit cohesion, cooperation, collaboration, and innovation. Start the year by asking yourself few simple questions: What have I done to better myself, my Family, and my organization?

As a Troop Command Team, our vision is that we are a cohesive team that is technically and tactically competent, operationally savvy and proficient in solving complex challenges. Leaders are proficient in anticipating organizational needs and rapidly developing viable solutions to resolve complex problems and implement sustainable systems to optimize the effectiveness of LRMC. The secret recipe: Teamwork, critical thinking, innovation, and trust at every level.

LRMC is an organization that does the routine things routinely and in an outstanding manner (Good order and discipline, Standards). We are technically and tactically proficient leaders who achieve success by encouraging innovation, collaboration and cooperation (our missions are symbiotic, understand your effect on those around you). We are a team that looks for opportunities to do extraordinary things in an outstanding manner (dare greatly, think outside of the box, transform thought, plan, develop, execute effectively and repeat). We make a difference every day in the lives of our Soldiers, Civilians, Families and those we support (selfless service). We develop and certify leaders (Service Members, Civilians, and Local Nationals) to train, teach, coach and mentor (Build a legacy, be a legacy). And lastly, we respect culture while strategically and tactfully employing new and sustainable ideas (change + discomfort = growth). Quality and Safety is the enduring center of gravity and Mission – People – Teamwork are the pillars of the foundation that we will invest in to maintain our center of gravity and achieve success.

As always CSM Contreras and I are proud and honored to be a part of the LRMC team. Thank you for all the many sacrifices and things you and your families have done and continue to do for the organization. We wish you a healthy and gratifying New Year.

\$LEGACY

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U.S. Army Col. Michael Weber (left), commander, Landstuhl Regional Medical Center and Command Sgt. Maj. Fergus Joseph, command sergeant major, LRMC, prepare to serve up the traditional Holiday Meal at the LRMC Dining Facility, Dec. 23.

Col. Michael Weber

Commander
Landstuhl Regional Medical Center

Happy New Year! I hope you had an enjoyable holiday season and are ready to move into 2021 strong and resilient. I'm sure for many, 2020 was a challenging year. However, now we get to begin the New Year hopefully full of holiday memories, feeling refreshed and ready.

We have much to look forward to in this new year, starting with the vaccine for COVID-19. I want to thank all of you who have stayed the course over the year and have worked to keep our community safe and healthy. As we roll out the COVID-19 vaccine over the coming months, keep in mind that at the time of this printing, we do not have a timeline for receiving the vaccine for all. First, we will receive an initial shipment to vaccinate those of our front-line healthcare workers and emergency responders who would like to receive it. As

we receive more vaccines, based on the CDC and Department of Defense timeline for priorities, others in our community will be able to receive it. You can find more information on the vaccine on our social media and the Department of Defense Web site.

Additionally, as of this printing, the vaccine is not mandatory for service members. Those who receive the vaccine are protecting themselves as well as their families and all with whom they interact. It is important to note the vaccines are only available after they have demonstrated to be safe and effective in large phase-three clinical trials, have been authorized by the U.S. Food and Drug Administration, and have been manufactured and distributed safely and securely. You are encouraged to make an informed decision as to whether or not vou would like to receive the vaccine. I think I speak for many when I say, I am hopeful this vaccine brings an end to this pandemic sooner rather than later.

During this month we'll observe the Marting Luther King Jr. Day of Service, Jan. 18. As we reflect on his life, make a plan for that day being a "day on, not a day off," to improve the communities we live in and encourage others to do the same.

Please continue to heed host nation guidelines for safety. Those of us who are Army will begin the new year under a new General Order, with tough restrictions related to travel and leisure. Please make sure you are aware of the rules and follow them appropriately. Our LRMC Troop Command does an excellent job of keeping you informed with Town Halls and update videos. Keep an eye on your email for details or talk to your supervisor for information on how to access these.

Thank you again for your work throughout the year, and I am excited about entering 2021 with such an amazing team!



In 2010, Stephanie Hergesheimer enlisted in the Army as a combat medic; 10 years later, sthe college graduate is now serving as an Army nurse. Statistically, she shouldn't be.

At a young age, the Vernon, Connecticut native entered foster care due to her mother terminating parental rights and an imprisoned father. Over the span of 15 years, Hergesheimer found herself bouncing from foster family to foster family, living in a total of 33 foster homes.

Figures looked unpromising for Hergesheimer, with only 25 percent of foster children graduating high school and less than three percent earning a college degree at any point in their life, according to the United States Department of Health and Human Services, Administration on Children, Youth, and Families, Children's Bureau.

Hergesheimer decided to prove those statistics wrong, despite her difficult childhood.

"School was my refuge," she said. "With everything that was going on, that was crazy in my life, school was my safe zone. That's where I could just focus on being a student and what I needed to get done. I could read and that would put me in a whole different world. I never had to worry about what was going on around me."

A haven for her, Hergesheimer not only graduated high school but was also awarded a full college scholarship. Although, at the time she was looking for something else.

"I didn't know what I wanted to do with (an education)," said Hergesheimer. "I was looking for purpose and direction to make a difference in the world. I didn't feel like I was getting that just sitting in a college classroom. So I gave up my scholarship and enlisted."

Hergesheimer soon found herself at a U.S. Army recruiting station, volunteering to enlist. Given three military occupational specialty choices, she was most interested in a position within healthcare due to her previous experience as a lifequard and babysitter.

"I was always interested in like saving people's lives and it's just been what I've always wanted to do - help people," she said.

Following a tour in South Korea where she worked as an emergency room medic, Hergersheimer found herself at Fort Campbell, Kentucky where she deployed with the 101st Combat Aviation Brigade to Afghanistan. After returning, Hergesheimer faced another hurdle after finding out she was pregnant and would soon be a single parent. Yet again, the situation only motivated her

Looking back, Hergesheimer believes the cynics, and her obligation to her daughter, continue driving her to succeed.

"Growing up, I was told I wouldn't make it and I wouldn't succeed just from my past," said Hergesheimer. "That definitely motivated me to prove them wrong. Then having a little daughter, having those little eyes look up at me and tell me 'you're my hero' pushes me to do more and be





Multinational trauma course aims to standardize battlefield care

Nearly 30 Service Members from United States and Allied Armed Forces across Europe participated in an International Trauma Combat Casualty Care course at Landstuhl Regional Medical Center, Sept. 30 - Oct. 2.

The international course, which included Service Members from four Nations, was aimed at providing unit-level health care providers life-saving instruction to increase survivability at the point of injury. The course marks the first time it has been taught at LRMC, which included multiple lessons covering everything from assessing a combat environment to requesting for medical evacuation of combat casualties

"The course teaches battlefield medicine," said U.S. Army Sgt. Ryan Williams, a combat medic with Landstuhl Regional Medical Center's Education Division. "Anvwhere from tourniquets all the way up to chest seals and goes through the MARCH algorithm." MARCH, an acronym for Massive hemorrhage, Airway, Respiratory, Circulation and Hypothermia, is an algorithm taught during the course which has proven essential in lifesaving care.

According to the TCCC handbook, the course of instruction has saved hundreds of lives during conflicts in Iraq and Afghanistan, citing the importance of the prehospital phase of care in reducing combat fatalities. The concept, developed in 1996 by special operations forces, are evidenced-based and battlefield proven to reduce deaths at the point of injury. Not only does the course introduce students to battlefield medicine best practices, it also serves to train participants in tactical combat components such as care under fire, tactical field care and tactical evacuation care.

"It's all about tactical field care," said Janine Foncello, a paramedic in the German Armed Forces, or Bundeswehr. "It's very important for me to learn here. (The Bundeswehr) wants to (improve) training for our Soldiers. To train and connect together with other nations is a diverse and nice experience."

"It's important for our international partners as well as ourselves to make sure we're up to date on current medicine, that we're not moving backwards in time and learning the most advanced medical treatments to increase the rate of survival for our patients," said Williams.



WAHC showcases courage, selflessness against COVID-19

WIESBADEN, Germany - At Wiesbaden Army Health Clinic, the fight against COVID-19 has given rise to medical protagonists working tirelessly to suppress the disease.

"We have changed our operations from what we were doing (before COVID-19), to what you see now," said U.S. Army Capt. Joshua Davis, a family medicine physician at WAHC, describing the clinic's robust posture against COVID-19 which includes a shelter designed to isolate possible COVID-19 patients from other populations. "We kind of just had to flip the switch and go full throttle."

Davis, who leads operations at the COVID-19 Screening Clinic at WAHC, describes the effort toward containing the spread as "adapt and overcome," adding the current conditions are what U.S. Army medical professionals prepare for.

"We train for this, but you can't train for this. We've done it as a team, this is our time to shine and we've been shining," said Davis. "There is no routine every day, we're adjusting fire each day."

With a small team of combat medics, Davis and other providers at the clinic continue to ensure the Wiesbaden community is medically ready. Wiesbaden is home of U.S. Army Europe Command, whose mission is to provide ready, combat-credible land forces to, and set the essential conditions for, U.S. European Command and NATO to deter aggression from any potential adversary in the European theater. Because of the severity of the disease, Davis acknowledged the courage and selflessness of combat medics who are at the frontlines against the pandemic.

"Army combat medics are the backbone of the operations, working long hours with the screening clinic and also transitioning back to seeing patients in our clinic," said Davis. "They don't do this for recognition. It can feel like the whole world has been put on pause, but not with medical (personnel). There's no offseason, when there is a crisis, that's when we step up, that's when we respond."



A grilled cheese sandwich and tomato soup.

For U.S. Air Force Tech Sgt. Nataliya Hampton, noncommissioned officer in charge of Medical Nutrition Therapy at Landstuhl Regional Medical Center, this is the meal that changed her perspective on the impact nutrition can have in patient care.

Hampton, a nutrition therapy technician with the 86th Medical Squadron, 86th Medical Group, was recently named the Air Forces' Nutrition Therapy Noncommissioned Officer of the Year for 2019. Originally enlisting in the Air Force to help pay for college, Hampton was slated to work as an aircraft loadmaster, but a delay in training redirected her toward the

LRMC upholds Joint Commission's



Landstuhl Regional Medical Center upheld The Joint Commission's Gold Seal of Approval for accreditation following a recent survey which reflect LRMC's commitment to TJC's standards and elements of performance, the same standards and elements used to survey civilian healthcare facilities.

During the visit, a team of Joint Commission reviewers evaluated compliance with hospital and behavior health care standards which altogether encompassed 516 standards, 2,511 elements of performance at seven separate locations across three countries.

"The Gold Seal of Approval is simply us maintaining our accreditation," said Maj. Elizabeth Jauregui, Joint Commission readiness officer. "This accreditation shows all of our staff, beneficiaries, and visitors that we hold the same high-quality standards as other hospitals across the United States and elsewhere.

"It was truly a team effort to prepare the organization across every level of staff," said Jauregui. "We didn't earn the goal seal, we've maintained the gold seal for many years. (The survey) was not something new, it just reaffirmed our commitment to quality and safety."

According to Jauregui, the gold seal reaffirms LRMC's commitment to quality and safety while providing a renewed focus on process improvement efforts by using the survey feedback to make LRMC even safer for patients.

Standards focus on important patient, individual, or resident care and organization functions that are essential to providing safe, high-quality care.

"The survey results are a testament to the dedication and commitment of the Soldiers, Airmen, civilians, contractors and local nationals to the quality of care we deliver at LRMC and the steps we take toward providing a safe health care environment for our patients," said Col. Michael Weber, hospital commander. "The survey also reveals a true sense of promise to our center of gravity: quality and safety."

as best in Air Force

medical nutrition field. Eleven years later, Hampton still maintains a passion for interacting with patients, something she accredits to her Airmen, Soldiers and leaders.

"(Nutrition therapy) turned into something where I became passionate about helping people," said Hampton, a native of Novovolynsk, Ukraine. "I was honestly really excited about (being recognized as top in her field), at the same time very thankful for having my Airmen who helped me stay motivated, which allowed me to be successful. But I am very thankful for this job."

As a junior Airman, Hampton's experience with a patient who refused to eat changed her outlook on her duties and the impact she can have on patients.

"Because I visited (the patient) on a daily basis, and discussed what foods to eat, it allowed (the patient) to see that someone showed interest. Then (the patient) did start eating and I still remember it was a grilled cheese sandwich and tomato soup," said Hampton. "That was the first time the patient ate in three weeks.

"You sometimes don't realize the impact you're having on people's lives," said Hampton. "When you're doing it, you're not thinking that's what it is. You're thinking it's just your job, but you're changing people's lives."



LRMC technicians earn top honors across Army Medicine

In a demonstration of their expertise and commitment to the field, two Landstuhl Regional Medical Center technicians were lauded for their efforts during 2019.

U.S. Army Maj. Robert Hjuler, Chief Technology Officer, at LRMC, and Jonathan Conway, lead network engineer, were recognized as U.S. Army Medical Department's Health Information Technology Officer and Civilian of the Year, respectively.

The Mercury Award, as it's known, recognizes AMEDD personnel who have made significant contributions and demonstrated outstanding excellence and achievement in HIT. The awards recognize the critical nature of information and technology in mission accomplishment. The name, Mercury, recalls the Roman god known for rapid transport of essential messages and information.

While the humble pair both credit their teams for the accomplishment, they oversaw various projects and services including maintaining free Wi-Fi services for visitors, improving cellular capabilities at various locations and a lifecycle refresh, replacing multiple switches, routers and other equipment throughout Europe.

Army Medicine Information Management Divisions are responsible for functions such as planning, engineering, installing, integrating and operating electronic medical health systems across an area of operations.

LRMCwelcomes newton enlisted



Landstuhl Regional Medical Center held an Assumption of Responsibility Ceremony where Command Sgt. Maj. Fergus Joseph was welcomed as the hospital's command sergeant major, at LRMC, Nov. 10.

The position of command sergeant major is considered the senior noncommissioned officer in a command, with responsibilities to include carrying out and enforcing policies and standards on performance, training, appearance and conduct of the organization.

"The command sergeant major position is one of importance and a significant relationship to the institution and with the American people," said Col. Michael Weber, commander, LRMC. "You see (LRMC) is not just a hospital, (LRMC) is a platform other (military units) count on to deploy forward and secure the objectives for their theater commanders."

During his remarks, Joseph was enthused to share his experiences as a young Soldier and learning about LRMC's legacy as a safe haven for deployed injured Service Members.

"Never did I think I would be part of this great organization," said Joseph. "The name (LRMC) itself is just a building, it's just the name of an organization. But it's the Soldiers, the officers, the (noncommissioned officers), the doctors, the medics, and the nurses that make this organization great. I look forward to what this great organization has to offer and I look forward to being part of the legacy team."





During COVID-19 operations, military medical treatment facilities across the Regional Health Command Europe have multiplied their virtual health utilization five times over to continue providing patient care in accordance with the Department of Defense Health Protection Condition measures, which called for the reduction of face-to-face routine medical services and elective surgical procedures. Moreover, the emphasis on physical distancing in medical settings has increased the need for alternative solutions for delivering patient care.

"Virtual health allows me to see patients from far away, who might not have access to a specialist, especially in remote areas like Africa or Asia, where specialty care is really hard to come by," said U.S. Air Force Lt. Col. Brendt Feldt, a surgeon at LRMC's Ear, Nose and Throat Clinic. "(Virtual health) gives me that face-to-face connection with a patient that I can't get over the telephone, and it gives us that interaction we like to have with our patients so that we can start to build a good relationship with them."

Feldt adds the service delivers the essential first meeting with a patient, allowing both parties to discuss possible diagnosis, treatment options that might be able to be done locally, or if travel to LRMC is required.

"It's a fantastic program that not only helps the joint warfighters, but also their families," said U.S. Army Lt. Col. Robert Cornfeld, medical director for the Virtual Medical Center Europe at LRMC. "Virtual health literally brings the medical center to the point of care where it's needed."

Additionally, virtual appointments with providers allow for beneficiaries to comply with COVID-19 stay-at-home

recommendations, limiting the spread of COVID-19 and keeping families safe.

Comfeld explains virtual health is delivered a number of ways including telephone appointments, synchronous video appointments and can take place anywhere the patient has a solid internet connection. Validating virtual health's impact during COVID-19, appointments have increased over five times the normal rate, maximizing physical distancing as recommended.

At LRMC, 42 specialty care services provide virtual health appointments while more medical providers continuously train to grow capabilities in other areas, including primary care.

"Virtual health is a tremendous force multiplier for readiness by keeping the warfighter on their mission instead of having to come to the medical facility for health care delivery," said Cornfeld. "That's our job in military medicine: to conserve the fighting force. If I can keep that soldier doing their job instead of having to come see me in the clinic, that's a fantastic win not only for the soldier but a win for the combatant commanders as well."



LRMC nurses answer call to combat Covid-19

LANDSTUHL, Germany -- Health care providers everywhere have answered the call to fight and prevent the spread of COVID-19. At Landstuhl Regional Medical Center, more than 75 nurses are among those who are volunteering to augment the critical care staff to combat the global pandemic if needed.

As part of larger efforts in staff readiness and development, clinical personnel not normally trained in critical care are undergoing various training elements designed to increase staffing capabilities in support of COVID-19 operations at LRMC.

"We're focusing on skills directly related to critically ill patients that are common in the COVID-19 patients that are being seen throughout the world right now," said U.S. Army Maj. Julie Duffy, a clinical nurse specialist at LRMC's Intensive Care Unit.

"We're working to make sure that (non-ICU nurses) are trained and have the understanding of COVID-19 and what (COVID-19) patients are experiencing, and the skills related to it."

In recent guidance from the Centers for Disease Control and Prevention, health care facilities are urged to consider mitigation strategies for staffing shortages to continue providing safe patient care and work environments. The training aims to educate nursing augments from different areas of the hospital in critical care medicine, consisting of online and hands-on training under supervision. Subjects include training specific to COVID-19 patients such as hemodynamics monitoring, airway management and mechanical ventilation basics, treating adult respiratory distress syndrome, infection control and personnel protective equipment protocols.

Inpatient nurses, as well as nurses from other units throughout LRMC, are volunteering to augment the ICU unit, increasing the capability to care for both COVID and non-COVID critically ill patients.

"There is a benefit for the nurses as well: the sense of purpose and helping. I think it's going to be big for a lot of them," said Duffy. "We know that there's a nursing shortage nationwide. So to be able to know that we helped in some way with the pandemic, I think that will emotionally help nurses."

Three times a week, cohorts of nurses continue to train with ICU and pulmonary staff members using the latest evidenced-based practices in treating individuals diagnosed with COVID-19. As more staff members are trained, Duffy expects training objectives to evolve.

"Right now, it's really more about familiarization with the equipment and just getting some hands on working with it, then we'll be able to throw it into patient scenarios," said Duffy. "Soon enough, nurses from throughout the facility will be trained so they're able to help (ICU) should the time arise."

Exercise highlights military medicine across Europe

From a snake bite to engaging targets and responding to threats, nearly 400 medical personnel from Landstuhl Regional Medical Center, 30th Medical Brigade and the German Armed Forces (Bundeswehr) participated in Operation Courageous Defense, a combined training exercise designed to showcase integrated medical operations in the European theater. March 3-6.

The exercise aimed to train and certify personnel on essential qualifications, to include Army Warrior Tasks and Individual Critical Tasks Lists which tests both Soldier skills and medical competencies.

According to section 702 of the National Defense Authorization Act for Fiscal Year 2017, the drive for operational readiness and support of operational and war fighting missions take priority over the delivery of clinical/health care services and the execution of business operations in an MTF. Meaning, Soldiers, Airmen and Sailors must be capable of performing



their duties both on and off the battlefield. This affords the Army, Air Force and Navy to train personnel not only on medical aptitude in a military treatment facility, but also their capability to provide patient care in war fighting and operational environments.

For over two years, LRMC implemented training to drill various roles of medical care in combat settings, from immediate lifesaving measures to evacuating patients to higher levels of care.

"OCD is an innovative, adaptive way of training our Soldiers within the MTF without disrupting patient care," said Lt. Col. Christina Buchner, commander, Troop Command, LRMC. "It shows we can train as Soldiers and make sure we're ready for any mission, whether that's global or local."

According to Buchner, the training also helps achieve the objective of synchronizing and providing support to combatant commanders and allies.

"(The exercise) ensures we are aligned with combatant commander objectives of providing medical capabilities to maximize their performance on the battlefield."

Because some medical roles are interchangeable between different levels of care, the exercise also provided Soldiers insight into medical roles outside of MTF environments.

For Soldiers with the 30th Medical Brigade, Operation Courageous Defense afforded them the opportunity to ensure the unit is at its highest state of readiness in order to support DEFENDER-Europe 20, the largest deployment of U.S. Forces to Europe in 25 years. The large scale Army-led exercise aims to build military readiness and interoperability with allies and partners to enable the movement of a large force across the theater.

Aside from validating combat and medical skills, Operation Courageous Defense empowered unit-level leaders to develop and execute their roles as noncommissioned officers and company-grade officers.

LRMC's exercise was one of the first of its kind for any Army military medical treatment acility.

the **LEGACY**

Medicine in a bag expands capabilities at SHAPE

MONS, Belgium - The concept of virtual healthcare is similar to modern social media communications or video conferencing, using audio-video technology to enable communication between a healthcare provider and the patient.

"Virtual health is a fantastic program that not only helps the joint warfighters, but also their families," said U.S. Army Lt. Col. Robert Cornfeld, medical director for the Virtual Medical Center Europe at LRMC. "Virtual health literally brings the medical center to the point of care where it's needed. Using today's technology, we can now go directly to (the beneficiary's) house and bring the services and specialties of LRMC to their front door."

To further enable remote patient monitoring using technology, medical professionals at Supreme Headquarters Allied Powers Europe (SHAPE) Healthcare Facility produced a kit designed to make telemedicine possible in any network-covered location.

"The (Telehealth in a Bag) kit is a backpack designed to make telemedicine mobile," said Libby Beck, telehealth program manager, SHAPE Healthcare Facility. "Essentially the presenter who is physically with the patient establishes a video connection via VTC with a distant provider to facilitate an encounter."

The Telehealth in a bag, or THIAB, is a self-contained kit consisting of digital stethoscopes, allowing heart, lung, and bowel sounds to be saved online, and streamed for medical



providers to review, an electrocardiogram, allowing providers to remotely diagnose a heart attack, a digital streaming camera, a telemedicine camera (a handheld 60 FPS, HD camera which can be maneuvered around and inside the patient), a laptop and a Wi-Fi hotspot. The kit is designed to be set up and connected with a medical professional in 10 minutes. The need for the mobility was realized during COVID-19 operations at SHAPE, to further protect providers from direct contact with possible COVID-19-positive patients while also protecting the community at large from the spread of the disease through quarantine home visits.

LANDSTUHL, Germany - Over 300 personnel at Landstuhl Regional Medical Center participated in Operation Courageous Ascent, a training exercise designed to test medical operations in austere environments, Nov. 17-19.

The exercise tested medical personnel on a variety of combat medical skills such as applying combat action tourniquets, casualty evacuation, dismounted patrolling, land navigation, movement under fire, communications protocol, identifying and reacting to improvised explosive devices and chemical, biological, radioactive and nuclear attacks.

"Our mission out here is to prepare Soldiers to deploy in support of contingency operations," said U.S. Army Maj. Denise Quintana, officer in charge of Operation Courageous Ascent and chief of Operations at LRMC. "We're training Soldiers to become proficient in Army Warrior Tasks, and Individual Critical Tasks Lists in order to survive on today's battlefield."

The Construct for Implementation of Section 702 of the National Defense Authorization Act outlines the priority of operational readiness and support of war fighting and operational missions over the delivery of clinical/health care services, meaning military medical personnel must consistently maintain a high standard of critical lifesaving skills for mission-related operations. At LRMC, war fighting and operational requirements are validated through exercises like Operation Courageous Ascent and robust hands-on, practical training programs.

According to Quintana, the monotony of clinical settings may degrade uniformed medical personnel's combat readiness, making training like Operation Courageous Ascent more impactful.

"Soldiers are eager to participate. It gives them a chance

to exercise the warrior skills they were trained to do," she explains. "Our end state is for LRMC to be a globally integrated, ready medical force, postured to support the Joint Warfighter and establish LRMC as the gold standard for readiness and ICTL training."

As Soldiers patrolled through surrounding forests of the medical center, concurrent medical simulations occurred at LRMC's Medical Simulation Training Center to refresh Soldiers on assessment and medical evacuations of combat casualties. For some, the experience offered an opportunity to participate in atypical roles outside of medical settings.

"I got a lot out of the training, I was actually a squad leader throughout the exercise," said U.S. Army Spc. Richard Russell, a biomedical equipment support technician at LRMC. "There were things I haven't even done since basic training such as reacting to indirect fire so it was pretty awesome to see it all again."

In addition to refreshing Soldiers on warrior tasks and lifesaving operations, the exercise also introduced other uniformed personnel to Army training exercises, reflective of LRMC's combined operations with U.S. Air Force counterparts.

"As an Air Force Service Member being integrated with an Army (squad), I felt that I was going to be singled out but it was actually a pretty good experience to be included as part of that team," said U.S. Air Force Tech Sgt. Danielle Miller, noncommissioned officer in charge, Pediatrics Clinic, LRMC. "You never know when you're going to be in (a combat) environment. Just having that familiarization

with (combat operations), I think would be definitely beneficial. (The training) was showing me things that I'm not as used to doing as a medic. I'm looking at how I can help those people that have already been hurt as opposed to (clinical settings)."

"I would recommend the training to other Soldiers because I didn't realize all the (warrior tasks) I had forgotten in just a year and a half of not participating in field exercises," said Russell. "Getting refreshers such as these I feel is very important. If I had been put as a squad leader in a real life situation without the refresher I would have been in a really bad spot."

The three-day exercise is the second training event of its kind this year for LRMC and the first since the start of the COVID-19 global pandemic, adding further stressors to the exercise as staff and participants exercised COVID-19 safety measures throughout the training.



Patient Caring Touch System Integrity

the quality of being honest and having strong moral principles



Army, Air Force, and Civilian: do what is right, legally and morally; even when nobody is looking. Integrity is a quality you develop by adhering to moral principles. It requires that you do and say nothing that deceives others. As your integrity grows, so does the trust others place in you. The more choices you make based on integrity, the more this highly prized value will affect your relationships with family and friends and

ARMY PHARMACIES REFORM DISPENSING SYSTEMS, INCREASE PATIENT SAFETY

the fundamental acceptance of yourself.



By: Joanne Bollhofer-White, Pharm.D.

LRMC Pharmacy

Quality and safety have always been the driving forces for U.S. Army pharmacies across Europe. Recent technological updates to the prescription dispensing process ensure this continues.

Significant changes include updated operating systems for the dispensing system, which previously limited network functionality. With the updated software, pharmacists can remain with patients as they research medical records and drug information to check for contraindications, increasing patient safety and reducing encounter time.

To simplify how this impacts patient safety, the system utilizes the medication information entered by the provider and links it with a unique prescription number and bar code. The bar code is then used in multiple steps in the dispensing process. It is scanned at the filling station, which brings up a photo of the expected medication that is then matched with a bar code on the pharmacy stock bottle. If the combination is correct, the pharmacist/

technician receives a positive response from the system. If it is not, the staff member can review and determine if it is incorrect or if new data needs to be entered. The filled prescriptions then move to a pharmacist checker where the bar code is again checked. Finally, the dispensing pharmacist or technician uses the bar code on the patient's ID and the bar codes on the labels to review the new medications and complete the order.

According to the Landstuhl Regional Medical Center Pharmacy staff, while the upgrades may be interesting from a technological perspective, the updates also prevent errors and allow pharmacy staff to focus on tasks requiring critical thinking and awareness.

Technology is only one part of the pharmacy's commitment to quality. The pharmacists and pharmacy technicians spend time with each patient to ensure information is correct and any concerns are answered. For most patients, this final encounter with health care staff sends them home confident they have received the best medication for themselves or their family.

AROUND LRMC



U.S. Army Col. Michael Weber (Left), commander, Landstuhl Regional Medical Center, and Command Sgt. Maj. Fergus Joseph (right), command sergeant major, LRMC, present an award to U.S. Army Spc. Bailee Kipper, an orthopedic specialist, during the commander's monthly award ceremony, Dec. 4. The monthly ceremony recognizes LRMC Service Members, staff and volunteers who have demonstrated their committment to patient care at LRMC.



U.S. Army Col. Abraham Suhr, (Left), deputy commander of surgical services at Landstuhl Regional Medical Center, serves a plate to patrons during the traditional Holiday Meal at the LRMC Dining Facility, Dec. 23. Suhr was one of dozens of LRMC staff members volunteering to assist DFAC staff with the meal and demonstrate their gratitude toward LRMC staff, visitors and patients during the meal.



Santa Claus joined LRMC staff and families during a hot cocoa with Santa event at the USO Warrior Center, Dec. 4. The event welcomed children of all ages to join USO staff members and LRMC volunteers for cookies and cocoa as part of LRMC's holiday season kickoff.



U.S. Army Col. Michael Weber, commander, Landstuhl Regional Medical Center, gives remarks after lighting the holiday tree during the Holiday Tree Lighting Ceremony at the Landstuhl Fisher House, Dec. 4. The annual event, hosted virtually this year, marks the beginning of the holiday season for LRMC.



U.S. Army Brig. Gen. Mark Thompson (right), commanding general, Regional Health Command Europe, and Command Sgt. Maj. Kyle Brunell, command sergeant major, RHCE, participate in the annual Thanksgiving Meal at Landstuhl Regional Medical Center. Nov. 26.

Hill Top Cafe / Warrior Restaurant

January Menu

	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
	Daily	Monday	the state of the s	ednesday Thurs		LUNCH Braised Pork Chops Brazilian Fish Stew Vegetable Curry and Rice	LUNCH 5 Spice Chicken Quarter Baked Mac and Cheese
	Breakfa	St Omelet/	The state of the s	Omelet/ Panca	kes/ Omelet/	Soup: Minestrone	PP
	Bars	Egg Bar	French Toast	Egg Bar French	Toast Egg Bar	DINNER Turkey A'la King Black Bean Chili	DINNER Caribbean Catfish Tortellini with Pesto
	LUNCH Maple Glazed Ham Vegetable Stuffed Peppers	LUNCH Pork Adobo BBQ Chicken Breast Vegetarian Lasagna	LUNCH Chicken Enchilada Ground Beef Tacos Black Bean Burritos	LUNCH Braised Pork Chops Lemon Baked Pollock Veggie Lasagna	LUNCH Southern Fried Chicken Quarter Beef Stew Chickpea Curry	LUNCH Lemon Baked Pollock Spaghetti with Meat Sauce	LUNCH Salisbury Steak Caribbean Black Beans
H		Soup: Clam Chowder	Soup: Tortilla	Soup: Red Thai Curry	Soup: Roasted Red Pepper + Tomato	Soup: Baked Potato	
1	DINNER Savory Baked Chicken Cuinoa and Black Beans	DINNER Roasted Turkey Eggplant Parmesan	DINNER Beef Fajitas Italian Broccoli Pasta	DINNER 5 Spice Chicken Quarter	DINNER Blackened Pollock Broccoli Cheese and Rice Casserole	DINNER Savory Baked Chicken Cheese Tortellini with Pesto	DINNER General Tso's Chicken Breast Vegetable Curry and Rice
100	LUNCH Battered Pollock Yankee Pot Roast	LUNCH Caribbean Jerk Chicken Quarter Shrimp Jambalaya	LUNCH Chicken Parmesan Meatballs with Marinara	LUNCH Polish Sausage with Sauerkraut Savory Baked Chicken Vegetarian Indian Korma	LUNCH Cajun Chicken Breast BBQ Beef Brisket	LUNCH Braised Pork Chops Brazilian Fish Stew Vegetable Curry and Rice	LUNCH 5 Spice Chicken Quarter Baked Mac and Cheese
		Soup: Chicken Gumbo	Soup: Tortilla	Soup: Broccoli and Cheese	Soup: Chicken Noodle	Soup: Minestrone	
	DINNER Blackened Catfish Baked Mac and Cheese	DINNER Braised Pork Chops Spinach and Mushroom Quiche	DINNER Beef Tacos Sweet Potato Burnto	DINNER Spicy Turkey Meatloaf Vegetarian Lasagna	DINNER Baked Pollock Vegetable Stuffed Peppers	DINNER Turkey A'la King Black Bean Chili	DINNER Caribbean Catrish Tortellini with Pesto
-	LUNCH Maple Glazed Ham Vegetable Stuffed Peppers	LUNCH Pork Adobo BBQ Chicken Breast Vegetarian Lasagna	LUNCH Chicken Enchilada Ground Beef Tacos Black Bean Burritos	LUNCH Braised Pork Chops Lemon Baked Pollock Veggie Lasagna	LUNCH Southern Fried Chicken Quarter Beef Stew Chickpea Curry	LUNCH Lemon Baked Pollock Spaghetti with Meat Sauce	LUNCH Salisbury Steak Caribbean Black Beans
	100	Soup: Clam Chowder	Soup: Tortilla	Soup: Red Thai Curry	Soup: Roasted Red Pepper + Tomato	Soup Baked Potato	1
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	LUNCH Battered Pollock Yankee Pot Roast DINNER Blackened Catfish Baked Mac and Cheese	LUNCH Caribbean Jerk Chicken Quarter Shrimp Jambalaya	LUNCH Chicken Parmesan Meatballs with Marinara	LUNCH Polish Sausage with Sauerkraut Savory Baked Chicken Vegetarian Indian Korma	LUNCH Cajun Chicken Breast BBQ Beef Brisket	LUNCH Braised Pork Chops Brazilian Fish Stew Vegetable Curry and Rice	LUNCH 5 Spice Chicken Quarter Baked Mac and Cheese
	LUNCH Maple Glazed Ham Vegetable Stuffed Peppers DINNER Savory Baked Chicken Quinoa and Black Beans	Soup: Chicken Gumbo DINNER Braised Pork Chops Spinach and Mushroom Quiche	Soup: Tortilla DINNER Beef Tacos Sweet Potato Burrito	Soup: Broccoli and Cheese DINNER Spicy Turkey Meatloaf Vegetarian Lasagna	Soup: Chicken Noodle DINNER Baked Pollock Vegetable Stuffed Peppers	Soup: Minestrone DINNER Turkey A'la King Black Bean Chili	DINNER Caribbean Catrish Tortellini with Pesto

The Hill Top Cafe offers two to three entree options for our guests, as well as starchy and non-starchy sides. Short Order menu: hamburgers, cheeseburgers, black bean burgers, grilled chicken breast, french fries and sweet potato fries. Daily Breakfast Bars: MWF: Omelet/Egg Bar T & Th: Pancakes/French toast

Weekdays: Breakfast: 6 - 8 a.m. | Lunch: 11:30 a.m. - 1 p.m. | Dinner: 4:30 - 6 p.m.

Weekends and Holidays: Breakfast: 7 - 9 a.m. | Lunch: 11:30 a.m. - 1 p.m. | Dinner: 4:30 - 6 p.m.

^{**}Menu is subject to change.

spotlight



U.S. Army Spc. Krissandra Thompson (center) recites the U.S. Army
Noncommissioned Officers creed during the graduation of Basic Leaders
Course Class 002-21, Dec. 4. Basic Leader Course (BLC), is the first leadership course Non-Commissioned Officers (NCOs) attend. BLC is a month-long course that teaches Specialists and Corporals the basic skills to lead small groups of Soldiers.

ONE TEAM. ONE PURPOSE.

Selfless Service.



U.S. Army Col. Michael Weber, commander, LRMC, fulfills training requirements such as Pediatric Advanced Life Support (PALS), Advanced Life Support (ALS), and Basic Life Support (BLS) recertifications with other Soldiers from around the region, Dec. 10. For nearly a year, despite constraints in training due to COVID-19 safety measures, LRMC's Education Division continues training Soldiers, Airmen, Sailors and International Partners.



Landstuhl Regional Medical Center's command team, Col. Michael Weber and Command Sgt. Maj. Fergus Joseph, and Troop Command team, Lt. Col. Christina Buchner and Command Sgt. Maj. John Contreras, conduct individual weapons training and qualification with the M17 Modular Handgun System at Breitenwald Range, Dec. 10. Annual training requirements, such as individual weapons qualification, emphasize the Army's mission to deploy, fight, and win our Nation's wars.



Cub Scouts with Landstuhl Pack 243 decorate doors at the Medical Transient Detachment as part of a Cub Scout Community Service Project, Dec. 12. Organizations such as Cub Scouts provide Americans overseas with opportunities to develop character, promote wellbeing and teach good citizenship, while boositing morale in their communities. (Courtesy Photo)