Support for OAW
More on pg. 8

U.S. Army Maj. Regina Velasco, an obstetrics nurse assigned to Bassett Army Community Hospital, Fort Wainwright, Alaska, provides treats to children currently housed at Rhine Ordnance Barracks, in Kaiserslautern, Germany, Sept. 22. Velasco is one of more than 50 Army Medicine personnel from across the United States who are augmenting Landstuhl Regional Medical Center in support of ongoing medical operations as part of Operation Allies Welcome.

INSIDE: LRMC Airman saves life while on leave
Nearly 5,500 Afghans vaccinated in less than 72 hours
As we continue our support of Operation Allies Welcome and support sections across organization in need, I want to reiterate my pride in being part of the LRMC team and seeing firsthand the tremendous efforts you put into our mission here at LRMC. You’re a testimony to our motto of “Selfless Service.”

While we endure through OAW, it’s important to also check in on each other and those around you, including families. Know that each team member here is important, your welfare and health are a necessity to doing your job so make sure to truly ask yourself and those around you if they’re okay. Additionally, it’s flu season and we’ve got a jump start on vaccinations this year, make sure to get yours as soon as possible. Dates can be found on the LRMC Facebook page.

With the help of our partner organizations here, I hope everyone gets a chance to reset at events like this month’s Resilience Day (Oct. 1) or the SFRG’s Spooktacular event (Oct. 29). Also remember the holiday season is coming up, so plan to ensure team members and leaders get the time off they deserve.

This month has a slew of observances, but I believe one condition which affects a large percentage of the population is breast cancer. October is Breast Cancer Awareness Month, and the condition affects one in eight American women. If you or someone you know is fighting breast cancer or a survivor, or even if you don’t know anyone in that category, join others in wearing pink throughout the month to show your support. Remember that women 40-44 have the option to start screening every year and women 45-54 should get theirs annually.

October is also National Disability Employment Awareness Month. The observance dates back to WWII when Service Members returned home with disabilities, sparking public interest in their contributions in the workplace. The awareness reaffirms our country’s commitment to ensuring equal opportunity for all citizens. It’s important to recognize the efforts of these individuals as much as any other population, thank you for your contributions to our success.

While COVID-19 allowed some to stay/work at home and enjoy the comforts of their own quarters, others didn’t have that same perception as home was the last place they wanted to be. Last year saw a spike in domestic violence cases worldwide as isolation and the stressors of the pandemic took their toll on some home environments. No matter what the situation is, there are resources to support victims. Family violence is a threat to the health, welfare and safety of Soldiers and Family members, and it severely degrades warfighter readiness. The Army Family Advocacy Program helps strengthen Army Families, enhancing resiliency and relationship skills, improving quality of life. Please reach out to our Child & Family Behavioral Health Service (06371-9464-6311) for information on their programs and to support those who need it.

Lastly, I want to discuss our Executive Leaders’ Offsite which was held earlier this month. For nearly a week, leaders from the organization gathered to discuss LRMC’s Way Ahead and overall climate led by our Workforce Engagement Office. We engaged in meaningful discussions and team-building activities which I hope broadened minds beyond their own sections to consider their part in the overall organization. I also introduced my Mission and Vision along with LRMC’s Strategic Lines of Efforts, which can be seen on pg. 5. I invite everyone to read over it and explore the Commander’s Leadership Philosophy found here. If you have any questions or comments, please utilize our “Ask the Commander / CSM” button on the MEDSHARE splash page. Additionally, we’ll be working to open these offsite events to everyone and member of Team LRMC. You’ll hear more about those opportunities through the Adjutant’s Office.

I’m grateful for the opportunity to lead this organization and in awe of the work and contributions you do each day. Thank you.
Army medical personnel vaccinate nearly 5,500 Afghan evacuees in less than 72 hours

By Gino Mattarano
Director, Public Affairs
Regional Health Command Europe

A diverse team of Army medical professionals vaccinated nearly 5,500 Afghan evacuees in less than 72 hours at Rhine Ordnance Barracks, Germany, Sept. 17-19.

Led by the 30th Medical Brigade, and with assistance from Regional Health Command Europe and operational units around Europe, the team administered measles, mumps and rubella, or MMR, and chickenpox vaccines to nearly 5,500 evacuees. A diverse team of Army medical professionals received measles, mumps and rubella and chickenpox vaccines to provide protection for Afghan evacuees.

The vaccination sites and management were set up at five different locations (LSAs) around Europe, and with assistance from Regional Health Command Europe and the 512th Field Hospital. The vaccination teams began administering their first shots to Afghan evacuees at 10 a.m. on Friday, and by 4 p.m. Sunday, they had administered MMR and chickenpox vaccines to nearly 5,500 people.

"One of our primary goals was to make the vaccination process as easy on our Afghan travelers as possible," Hundertmark said. "That meant deploying vaccination teams at five different LSAs (Life Support Areas), which was a bit of a logistical challenge for us, but our teams performed heroically!"

Under the direction of the 519th Hospital Center, the vaccination teams began administering their first shots to Afghan evacuees at 10 a.m. on Friday, and by 4 p.m. Sunday, they had administered MMR and chickenpox vaccines to nearly 5,500 people.

"We originally estimated that it would take a week to vaccinate many people, but set a goal to get everyone vaccinated in five days," Hundertmark said. "I never dreamed we could finish in less than three days, but our diverse team of medical professionals came together quickly and functioned like a single medical element. This is a testament to how the Army Medicine team performed heroically!"

Along with medical personnel from Landstuhl Regional Medical Center and Medical Department Activity Bavaria and operational units across Europe, there were also Army medical teammates from the United States augmenting the team. Sgt. Daniel Rodas, an Army medic assigned to Madigan Army Medical Center, Wash., says he was proud to be a part of the mission.

"I was so glad I got to play a role and watch them make history," Hundertmark says that despite how busy the entire medical team has been supporting this effort over the last several weeks, the Soldiers were excited to be a part of the mission.

"It meant a lot to be part of this mission and to work with my battle buddies to help the Afghan evacuees," said Pvt. David David, an Army medic assigned to the 512th FH. "I felt good to see a smile on their faces after treating them and knowing that I’m doing my part to help them. I was surprised at how flexibly and efficiently my unit and others worked together when called to action."

With medical personnel from Landstuhl Regional Medical Center and Medical Department Activity Bavaria and operational units across Europe, there were also Army medical teammates from the United States augmenting the team. Sgt. Daniel Rodas, an Army medic assigned to Madigan Army Medical Center, Wash., says he was proud to be a part of the mission.

"The way the Army Medicine in Europe team and everyone involved in the mission came together to help make the travelers comfortable while they were here really impressed me," Rodas said. "I was surprised by how appreciative the travelers were. Even after I poked them with a needle to give them their vaccines, most of them thanked me!"
By Marcy Sanchez  
Public Affairs Specialist  
Landstuhl Regional Medical Center

This past summer while on leave, U.S. Air Force Senior Airman Amber Lash did what most 20-year-old Service Members do while on vacation: travel, visit with family and enjoy their time off. Little did Lash know her medical training as a pharmacy technician at Landstuhl Regional Medical Center, where Lash works with a nurse who also happened to be dining at the restaurant. The pair continued resuscitation efforts for approximately 20 minutes until the medics arrived.

"Before the medics got there, he had regained his pulse and let out a small breath of air, so that kind of gave us hope," explains Lash. "Once the medics got there, they checked his pupils to see if they were dilated, which they weren't and started giving him different injections."

According to Lash, she asked the medics which medications they were giving the man so she could relay that information to the man's wife, who was now in panic.

"As a pharmacy technician, I do know what most medications are and what they do," explains Lash. "I let the wife know what the medications were and how it was going to help."

Although basic life support certifications are only required by healthcare personnel, both military and civilians, who have direct patient care at Landstuhl Regional Medical Center, Lash was encouraged to train in the life-saving procedures. "The pharmacy is not direct patient care, so it's very rare that we have to utilize (CPR training)," said U.S. Air Force Master Sgt. Karen Stegall, noncommissioned officer in charge, Department of Pharmacy, LRMC. "The fact that (Lash) was able to take that skill set, take initiative and save someone is a phenomenal feat, especially in a non-patient care setting."

Stegall, who is Lash's second-line supervisor, explains she isn't surprised the Airman acted the way she did, as she describes Lash as a model Service Member ahead of her peers. "(The act) definitely speaks highly to her readiness, her ability to retain information and act on the information. I think it's phenomenal, courageous and very brave of her," said Stegall. "If you stay ready, you don't have to get ready and she's a testament of just that."
Soldiers aid LRMC efforts amid OAW

More than 50 Soldiers from across the U.S. are supporting operations at Landstuhl Regional Medical Center, aiding in the ongoing mission to provide medical care to Afghan evacuees currently in Germany. For over a month, Soldiers ranging in professions from interpreters to physicians, have augmented personnel at LRMC in support of operations at the hospital and across Germany, including Ramstein Air Base and Rhine Ordnance Barracks, which has housed up to 12,000 and 5,000 Afghan evacuees at a time, respectively. The mission, part of overall Army efforts supporting Operation Allies Welcome, in coordination with State Department and Homeland Security, is providing essential medical care during the reception, processing and transfer of Afghan evacuees to the U.S. At Rhine Ordnance Barracks, also known as ROB, a few medical stations are set up amongst the military installation’s sprawling tent city, where medical professionals from various units are caring for and treating evacuees 24/7.

“I flew in on 26 August, so I’ve been supporting the mission at LRMC, Ramstein Air Base and Rhine Ordnance Barracks,” said U.S. Army Maj. Regina Velasco, an obstetrician nurse assigned to Bassett Army Community Hospital, Fort Wainwright, Alaska. “We’re making sure they’re aware of health care services available and that they can feel safe coming to the medical tent when they need to.”

In addition to supporting medical efforts at ROB, Velasco has branched out to other sections in LRMC where extra hands are needed in response to the sudden increase in patients.

“The (Soldiers) were brought out (to Germany) to support whatever missions given to us. Some of us are supporting Medical / Surgical operations, labor and delivery and OB/GYN,” said Velasco, a native of Oahu, Hawaii. “This has been a great opportunity to work with (Afghan evacuees) also being able to let them know we care about their wellbeing and letting them know they can trust us with their health.”

The sudden request for support of OAW also tested the U.S. Army Medical Forces’ readiness and ability to respond to unexpected operations with little notice.

“There were only a few days to prepare to deploy and get everything in order, said U.S. Army Capt. Daniel Braun, a Pensacola, Florida native and medical / surgical nurse assigned to Benning Martin Army Community Hospital, Fort Benning, Georgia. “It’s been quite an awesome and rewarding experience getting to Germany, getting the opportunity to take care of these patients and to learn of their experiences has been a broadening experience.”

Additionally, support from across the Army has allowed LRMC to continue supporting the largest U.S. Military community outside the United States, particularly in high-demand medical specialties. Specialized medical requirements are often overlooked during mass evacuation efforts like Afghanistan, says U.S. Army Capt. Iris Evans, a certified nurse midwife also assigned to Benning Martin Army Community Hospital at Fort Benning. The number one concern may be to get evacuees to a safe place.

“The Chicago native, who has helped deliver two Afghan evacuee newborns, says female medical needs are plentiful, as most female Afghans aren’t used to getting the type of health care normalized by Western cultures. Furthermore, having female providers, such as Evans, is culturally appropriate as it is normal for Afghan women to labor and deliver at home to avoid contact with male medical staff, which has led Afghanistan to have one of the highest maternal death rates in the world.

“Women’s Health between 2016 and 2018. “The mission kind of almost fell in my lap when the Army needed a (practical nursing specialist) with maternal experience. I got out here soon after, boots hitting the ground running.

“Missions like these are why I joined the military, I’m not only helping protect and serve my own (compatriots), but others as well,” said the Fayetteville, North Carolina native. “To be in a position, in a situation, where I can provide service and care for Afghan evacuee families who do not have much or anything at all, it’s an honor and I’m blessed and grateful to be part of those caring hands.”
Medical professionals of the Slovak Republic Armed Forces visited with Landstuhl Regional Medical Center trauma specialists during a medical military expert exchange at LRMC, Aug. 19. The exchange allowed the medical professionals to discuss best practices and increase interoperability between NATO allies. The visit included discussions on LRMC’s unique Trauma program, which expands across three continents and encompasses four combat commands, a tour of the hospital, a visit to LRMC’s European Medical Simulation Center and insight into LRMC’s Traumatic Brain Injury and Rehabilitation programs.

“We have senior leaders from the Slovak Armed Forces military medical service and (civilian health care specialists) who came to visit,” said U.S. Army Lt. Col. Brad Rittenhouse, medical director, Trauma Program, LRMC. “They want to find out what our (trauma care) practices are and also more complex surgeries that we handle.”

Also joining the group was the Slovak Armed Forces’ Deputy Surgeon General, Slovak Armed Forces Col. Jozef Ragan. “The medical professionals (who visited) are leaders in their professions,” said Ragan. “We recognize the opportunity we have (through collaboration) to do our jobs better for our (Service Members).”

Although U.S. and Slovak Armed Forces have a history of cooperation on the battlefield through years of NATO operations in the Middle East, no formal program exists to exchange medical best practices.

“Through cooperation we can fill those areas to allow us to eventually be able to work in combined teams.” Although the informal visit was strictly an observation of how the DOD’s only Level II Trauma Center outside the U.S. operates, Ragan believes future training partnerships can evolve patient care for both nations.

“(Service Members) deserve the same treatment, whether you’re American or Slovak, and we should guarantee that treatment,” said Ragan. According to Ragan, in addition to developing capabilities, the association may also contribute to advancing military medicine through research and education.

“It’s about creating capabilities which we can sustain and continue in tough times,” said Ragan. “You need a team which is properly trained and well communicated to support our troops during a war conflict or during disaster relief operations.”

At 52, Kimberly Byers-Lund questioned something most high school and college students consider as they near graduation... what to do next?

Already a physician with her own practice in the Southern California city of Coronado, home to several military bases, including half of the Navy’s SEAL teams, the San Diego native had been treating Service Members for years. Her children had recently moved on to college, so the empty nest led her to consider her next steps as a physician to use in the U.S. Army Reserves.

“I’ve been taking care of military forever and I always had the itch,” explains Byers-Lund, 60, now a lieutenant colonel. In her short 8-year career, Byers-Lund has experienced a variety of missions, including deployments in support of humanitarian and operational missions. Most recently, Byers-Lund unexpectedly became a part of one of the largest and most complex humanitarian airlifts in history, as she supported the medical needs of Afghan evacuees as part of Operation Allies Refuge.

As an Individual Mobilized Augmentee (IMA), Byers-Lund is assigned to Landstuhl Regional Medical Center to exercise her scope of practice as a family medicine physician where it is needed most. She conducts a five-week Annual Training period to satisfy her Army Reserve obligations.

In her last week of training at the U.S. Army Health Clinic Kaiserslautern, the OAR mission suddenly needed support. According to Byers-Lund, she immediately said “I’ll go!” because of her past experience with humanitarian missions.

“I feel like my timing was amazingly blessed. I feel really lucky to have done that joint operation with the Air Force,” said Byers-Lund.

“The mission was both challenging and rewarding and I learned a lot.”

While she says the dichotomy of doing both clinical and field operations was “complicated” and nothing short of, “I was a key witness in a (serial killer’s trial),” explains Byers-Lund.

“I was actually an employee where a teen boy had been lured by John Wayne Gacy, also known as the Killer Clown, to his house to discuss a possible job opportunity. Earlier in the evening, Byers-Lund had borrowed the boy’s jacket and left a receipt in the pocket, which was later found at Gacy’s residence, eventually leading to his conviction and involvement in the boy’s death.

“I had to go to court and testify against him,” said Byers-Lund. “I realized life was really precious, so that’s what drove me to medicine so I can help others live their best life because you never know when it’s over.”
U.S. Army Sgt. Maj. Joseph Franco, chief medical noncommissioned officer, Landstuhl Regional Medical Center, discusses his experiences growing up and how that led him to enlist in the U.S. Army during the National Hispanic Heritage Month observance at LRMC, Sept. 22. Today, more than 139,000 Hispanic Americans serve in the Total Force, making up 16 percent of the Army.

Bags of donated clothes, toys and other items are placed outside the Armstrong Club on Vogelweh for pick up in support of donation efforts to Afghan evacuees as part of Operation Allies Welcome, Sept. 16. The donation efforts were part of a team-building exercise during the Commander’s Strategic Offsite event which aimed to increase teamwork, and communicate the LRMC mission and vision to leaders of the organization.

The Hill Top Cafe offers two to three entree options for our guests, as well as starch and non starch sides. Short Order menu has hamburgers, cheeseburgers, black bean burgers, grilled chicken breast, french fries and sweet potato fries. Daily breakfast items: Waffles, Cinnamon Rolls, Bagels & Coffee. French toast.

Weekends: Breakfast 6 - 10:30 a.m. | Lunch: 11 a.m. - 1:30 p.m. | Dinner: 4:30 - 6 p.m.

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

**Menu is subject to change.**