

Rounds

Eisenhower Army Medical Center



JANUARY 2019



**PAJAMAS
WITH
SANTA**

Jan. 3

HEAT Instructor-Operator Training, TADSS Bldg. 81100, 8 a.m. to 2 p.m.

Grand Rounds, first floor auditorium, 8-9 a.m., Topic: TBD

SHARP Soldier/Civilian Annual Training, first floor auditorium, 9:30 a.m. to 12:30 p.m.

Jan. 9

Leadership Development Program, first floor auditorium, 4-5 p.m.

Jan. 10

Commander's Portal Workshop, Bldg. 81101, 8-11 a.m.

Commander's Portal Workshop, Bldg. 81101, 1-4 p.m.

Grand Rounds, first floor auditorium, 8-9 a.m.

Jan. 12

School Screenings, EAMC outpatient pharmacy, 8 a.m. to 2 p.m.

2019 MWR Health and Wellness Fair, Nelson Fitness Center (Gym 6), 10 a.m. to 2 p.m.

Jan. 14

Comprehensive Soldier and Family Fitness Resilience Training, Good Shepherd Chapel, 8 a.m. to 5 p.m.

Jan. 15

Comprehensive Soldier and Family Fitness Resilience Training, Good Shepherd Chapel, 8 a.m. to 5 p.m.

Jan. 16

Resilience Training, first floor auditorium, 8-10 a.m.

Facebook Town Hall Forum, Darling Hall IOC, noon to 1 p.m.

Jan. 17

PALS (HESD), Bldg. 38716, 8 a.m. to 4 p.m.

HEAT Instructor-Operator Training, TADSS Bldg. 81100, 8 a.m. to 2 p.m.

Grand Rounds, first floor auditorium, 8-9 a.m., Topic: TBD

SHARP Soldier/Civilian Annual Training, first floor auditorium, 9:30 a.m. to 12:30 p.m.

Jan. 18

Martin Luther King Jr.'s Birthday Training Day

Jan. 21

Martin Luther King Jr., Holiday

Jan. 23

Leadership Development Program, first floor auditorium, 6-7 a.m.

Resilience Training, first floor auditorium, 8-10 a.m.

Jan. 24

Grand Rounds, first floor auditorium, 8-9 a.m., Topic: TBD

Jan. 25

EAMC Quarterly Retirement Ceremony, first floor auditorium, 10 a.m. to noon

Jan. 30

Resilience Training, first floor auditorium, 8-10 a.m.

Jan. 31

Grand Rounds, first floor auditorium, 8-9 a.m., Topic: TBD

SHARP Soldier/Civilian Annual Training, first floor auditorium, 9:30 a.m. to 12:30 p.m.

Choose what's on your plate to gain a tactical edge

Danielle Dunnagan, MS, RD, LD

Nutrition Care Division

Eisenhower Army Medical Center

As a dietitian, I frequently get asked what foods are best to eat before and after exercise whether it be to add muscle, lean out, or improve athletic performance. It's no secret that food and exercise go hand in hand, but performance-based nutrition is not just what you eat. It's when you eat, too.

Nutrition has a vital role in optimizing exercise as well as enhancing recovery. Because of this, professional soldier/athletes should take an interest in choosing the right foods to fuel for success.

Carbohydrates: The body and brain's preferred source of energy

Dietary sources: grains, cereals, pasta, rice, potatoes, fruit, milk, yogurt

Carbohydrates are a vital fuel source for both endurance and resistance training and can be divided into two main groups. Complex carbohydrates are digested slower because of their fiber content and help provide a sustainable source of energy. Simple carbohydrates are broken down into energy much faster and can be useful when consumed before exercise. When carbohydrates

Performance-based nutrition is not just what you eat. It's when you eat, too.

are broken down in the body, they are stored in muscles as glycogen, or your body's main fuel source when exercising. It is important to consume carbohydrates both before and after exercise to maximize these glycogen stores for sustained energy.

Fat: Primary form of stored energy

Dietary sources: nuts, seeds, oils, fatty fish (salmon, tuna, trout, sardines, mackerel, herring), avocado

Fat is the most concentrated form of energy and plays an important part in our overall health. Fat helps insulate the body, protect organs, provide structural support for cells, and transport nutrients. Choose unsaturated dietary fats from the sources listed above to enhance performance and recovery and decrease inflammation present in the body.

Staying hydrated and practicing dietary supplement safety are also imperative for overall health and performance.

Protein: Repairs and rebuilds

Dietary sources: meat, poultry, fish, eggs, beans, milk, cheese, yogurt, soy, grains

Protein is broken down into amino acids which are the building blocks for the human body. Protein is needed for many purposes such as formation of muscle, hair, nails and skin as well as muscle contraction and injury recovery.

Protein by itself is not a major form of energy and no storage form exists in the human body. An active individual needs between 0.4 and 0.8 grams of protein per pound of body weight per day. Try choosing lean sources of proteins to help reduce saturated fat intake.

Eisenhower Army Medical Center's Nutrition Care Division is offering a new class at the Army Wellness Center called "Performance Nutrition: Gaining the Tactical Edge." This class teaches performance nutrition, nutrient timing and supplement safety.

Editor's note: "Performance Nutrition: Gaining the Tactical Edge," is held the second Friday of the month at 1:30 p.m. in the Army Wellness Center (Building No. 29605, next to Gordon Fitness Center). Class lasts 60 minutes.) Reservations are recommended as class size is limited. To reserve your spot, call EAMC's Nutrition Clinic at 706-787-2243 or 706-787-3081.

Together, we can do anything

Col. David E. Ristedt

Commander

Eisenhower Army Medical Center

Welcome to 2019. This year will prove to be an exceptional year for the Eisenhower team. As I look back at 2018, the major highlights include your performance during the Joint Commission Survey and all other external visits that validated your delivery of outstanding quality of care. We focused on readiness for our supported units, delivered another year of tremendous support to Army education activities including our residencies, behavioral health, nursing and enlisted specialists. Finally, we've invested heavily in our culture of 5-Star care by prioritizing onboarding and Arbing Training for new employees and leaders.

We delivered exceptional value in resource management, facilities prioritization and modernization. We weathered several hurricanes, and exceeded HEDIS and all other data quality measures.

Your performance made it look easy throughout the year.

Command Sgt. Maj. William Allen and I remain exceptionally proud of you. Your performance made it look easy throughout the year.

As we head into 2019, we must prioritize our efforts to continue delivery of 5-Star care while shaping the organization in preparation for transition to the Defense Health Agency. We have the resources and

the guidance to perform both missions but must continue to evolve. Some adjustments are already underway that will "right-size" the hospital and we will continue to shape the organization with an eye on the priorities of readiness, support to Graduate Medical Education and 5-Star Patient Experience starting with an exceptional staff experience.

I owe you — the staff and our customers — timely communication of items of interest. To that end, CSM and I still monitor and respond to the "What's on Your Mind" input and we are initiating a "Commander's Blog" so we can provide more real-time information.

We ask that you continue to provide your leadership with recommendations, celebrate excellence and highlight challenges.

Remember: We are Eisenhower. Together, we can do anything.

Online resource for managing occupational illnesses, injuries

Mary E. Gaudette

Librarian

Eisenhower Army Medical Center

MDGuidelines is an online application that assists health care professionals in managing the appropriate care and treatment needed to get individuals who have incurred occupational injuries or illnesses safely back to work and their normal activities within optimal timeframes.

Users can search by keyword, ICD code or anatomical region to locate guidelines

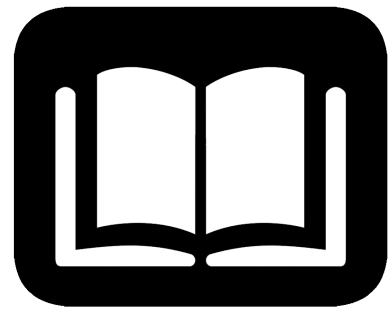
for the applicable topic (diagnosis or condition). The topic pages provide information regarding evaluation and management workflows, prevalence and incidence rates, work-relatedness, diagnosis, treatment, prognosis, differential diagnosis, common comorbidities, likely complications, ability to work, hospital costs, and follow-up care.

The Duration View search option provides tools for comparing and determining the expected length of disability for a given individual. The Medical Care and Surgery Duration tables display minimum, optimum, and maximum recovery duration periods based on job classes that range from Sedentary to Very Heavy, as defined by the Department of Labor.

In Case View, case managers can calculate the predicted duration period by selecting the applicable demographic and comorbidity factors that apply to a patient.

The Diagnosis and Related Treatment and Formulary tools facilitate access to the American College of Occupational and Environmental Medicine evidence-based Practice Guidelines for topic management and drug treatment recommendations.

Additional resources include instruc-



tional videos, a job look-up tool, links to CDC Guidelines and state Workers' Compensation treatment guidelines, and an equivalency mapping tool for ICD-9-CM and ICD-10-CM codes.

Access to MDGuidelines (<https://www.mdguidelines.com/>) is free to all .mil email account holders; however, registration is required for access. To obtain an account and optional 45-minute online training session, send a registration request to David Kukielka at dkukielka@reedgroup.com. A registration link is also available in the Databases section of the Health Sciences Library's Ikenet page.

Once registered, you can request additional training by sending an email request to mary.e.gaudette.civ@mail.mil.

Rounds
Eisenhower Army Medical Center

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Rounds is an official monthly publication of Eisenhower Army Medical Center at Fort Gordon, Georgia, produced by the EAMC Public Affairs Office for and about the staff of the hospital and the military members, family members and beneficiaries who choose EAMC for their Five-Star Health Care.

Editorial content is under the direction of and serves the mission of the EAMC commanding officer. Email: usarmy.gordon.medcom-eamc.mbx.pao@mail.mil.

4 EAMC achieves accreditation by Commission on Cancer

Cris Hightower, RN, Certified Case Manager

Oncology Clinic
Eisenhower Army Medical Center

Eisenhower Army Medical Center provides cancer care that has earned accreditation from the nationally renowned Commission on Cancer. The CoC was established by The American College of Surgeons. Now with several other professional organizations in alliance, their ongoing mission is to improve cancer care. Their mission focus includes treatment outcomes, survivability and quality of life throughout the spectrum of care. Their program is responsible for establishing, interpreting and evaluating cancer care standards of treatment facilities for the purpose of improving the outcome of care. Care standards include care along the continuum from prevention, treatment and end-of-life.

Accreditation standards

A cancer treatment program must first be

Care standards include care from prevention, treatment and end-of-life.

committed to initiating continuous quality improvement processes that demonstrate comprehensive, patient-focused care. Obtaining CoC accreditation is voluntarily and must be requested by the cancer committee. With that request, comes a rigorous survey of the facility's diagnostic screening, treatment and availability of supportive psychosocial services.

A meeting with a CoC surveyor is scheduled and the surveyor visits the treatment facility. During the survey visit he meets with cancer committee members to review and discuss quarterly report findings, member responsibilities, cancer program activities and related data. Pathology reports are reviewed for compliance with the College of American Pathology protocol. A Performance Report provided with

specific areas for program enhancement and, if facility findings have met the CoC standards, notification of accreditation is awarded.

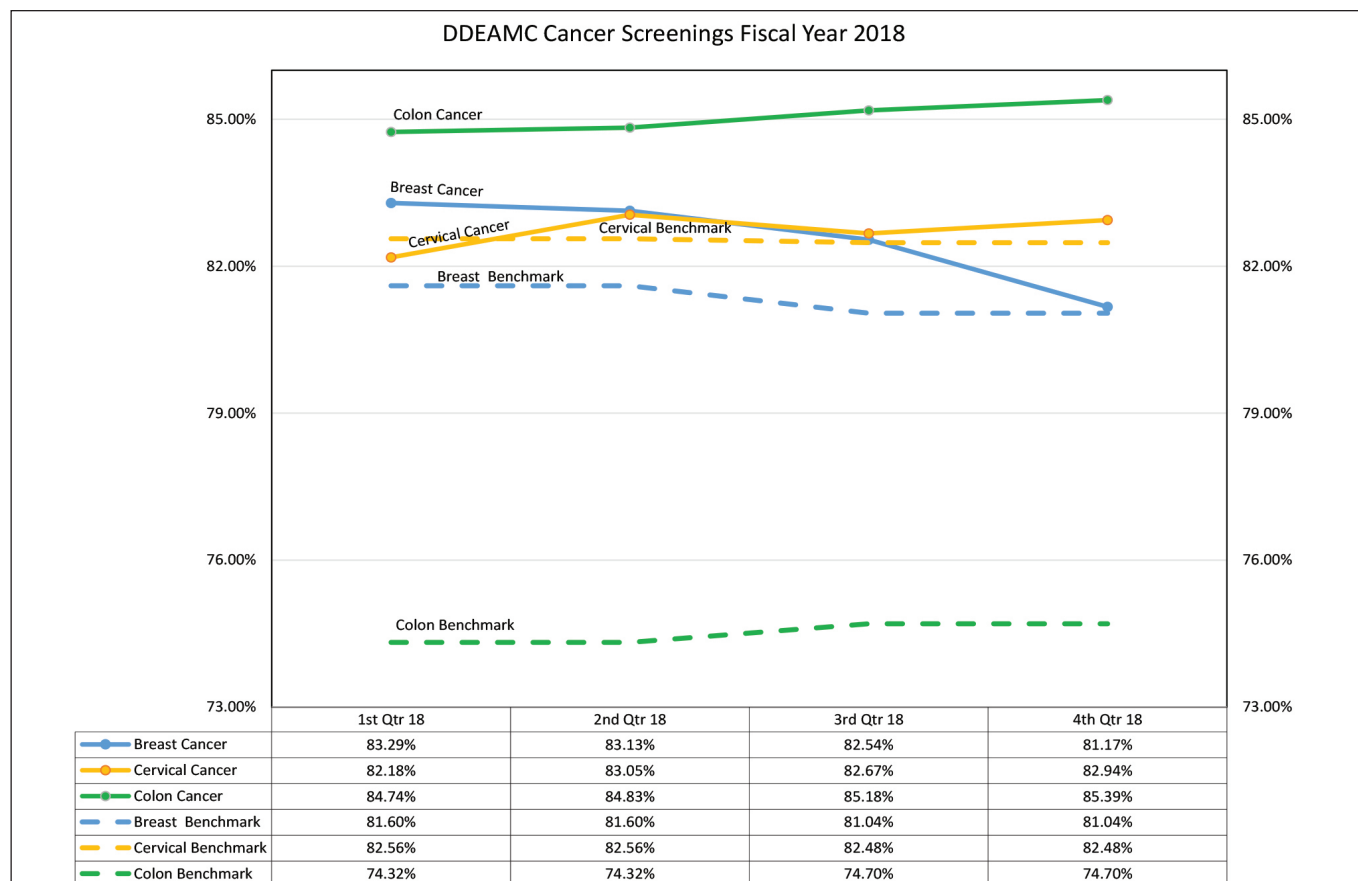
A cancer committee is required, at a minimum, to have the following members:

- Chief Executive Officer and/or chief leadership administrators
- Cancer Liaison Physician
- Cancer Committee Chair
- Cancer Program Administrators
- Designated Cancer Committee Coordinators
- Hospital Registrar(s)

Benefits of accreditation

- Confidence in receiving quality cancer care determined by evidence-based guidelines
- Seamless care coordination and navigation throughout treatment
- A multidisciplinary team approach to optimal treatment

see **CANCER** on page 11



Data courtesy of EAMC Oncology Clinic

The chart reflects Eisenhower Army Medical Center's cancer screening data during Fiscal Year 2018 and are measured using the benchmarks for breast, cervical and colon cancers.

EAMC soldiers train with 115th Combat Support Hospital



Photo by Maj. Mike Knight

Soldiers with the 115th Combat Support Hospital of Fort Polk, La., receive instruction from the crew on loading and unloading patients from a UH-60 Blackhawk during a training exercise Oct. 14-27. The exercise included four soldiers from Eisenhower Army Medical Center who are assigned to the unit via PROFIS.

Maj. Mike Knight

Clinical Nurse Officer in Charge
Eisenhower Army Medical Center

Four Soldiers from Eisenhower Army Medical Center trained with their assigned PROFIS unit, the 115th Combat Support Hospital at Fort Polk, La., Oct. 14-27. The

team included Maj. Jonathan Ellement, ER physician; 1st Lt. Anthony Jurkowski, nurse, 9MSP; 1st Lt. Catherine Ionescu, nurse, 11W; and Maj. Mike Knight, nurse, 13E.

The focus of the training exercise was completing many of the unit's Mission Essential Task List tasks of establishing

the hospital, and receiving and treating patients.

For many soldiers assigned to the 115th CSH, both organic and as PROFIS personnel, this was their first experience in a field hospital.

For Jurkowski, "the training was important because it allowed individuals who are assigned to medical treatment facilities and other facilities to work with organic members of the unit to educate each other on various professional and inter-professional skills we do not use at our different units. It allowed opportunities to brainstorm ways to improve the flow and care of patients through the field hospital to better develop our overall readiness to deploy as a cohesive combat support hospital. It was also motivating and refreshing to train with a field unit to refresh our AWTs and basic soldiering skills."

That experience was similar for Ionescu who said she, "gained a new perspective and appreciation for the capabilities and resiliency of Army Medicine. It was an amazing opportunity to train with such an enthusiastic and persevering team of soldiers. I look forward to future trainings



Photo by Maj. Mike Knight

1st Lt. Anthony Jurkowski, center, a nurse from Eisenhower Army Medical Center's 9MSP, receives a simulated patient in the ER of the 115th Combat Support Hospital at Fort Polk, La., during a training Oct. 14-27. Jurkowski is assigned to the 115th CSH through PROFIS.

see **TRAINING** on page 11

'Fused' technologies give 3D view of prostate during biopsy

David M. White

Public Affairs Officer

Eisenhower Army Medical Center

A high-tech procedure that makes prostate biopsy more accurate and thorough is being rolled out at Eisenhower Army Medical Center.

The procedure merges ultrasound with MRI images to give urologists a real-time, three-dimensional view of the prostate. Because the MRI images are analyzed by a radiologist prior to the biopsy, the urologist has a targeted approach to collecting tissue samples.

"Eisenhower is one of a few hospitals doing this procedure in the state of Georgia," said Lt. Col. Jennifer Pugliese, MD, chief of Urology at Eisenhower Army Medical Center.

Other than skin cancer, prostate cancer is the most common cancer in American men, according to the American Cancer Society. For 2018, the Society estimates "about 164,690 new cases of prostate cancer will be diagnosed and there will be about 29,430 deaths from prostate cancer."

"About 1 man in 9 will be diagnosed

"Eisenhower is one of a few hospitals doing this procedure in the state of Georgia."

— Lt. Col. Jennifer Pugliese, MD,
chief of Urology at Eisenhower
Army Medical Center

with prostate cancer during his lifetime," according to ACS statistics. "Prostate cancer develops mainly in older men and in African-American men. About 6 cases in 10 are diagnosed in men aged 65 or older, and it is rare before age 40. The average age at the time of diagnosis is about 66."

The standard screening for prostate cancer, according to Pugliese, is a blood test that specifically measures PSA, or prostate serum antigen, and a digital rectal examination. Abnormal PSA levels may indicate the need for a prostate biopsy where, using ultrasound alone for guidance, tissue

samples are taken with a biopsy needle that is passed through the ultrasound probe and rectal wall into the prostate.

"Using a standard grid pattern, I'll take at least 12 samples," she said. This method returns a false negative result of 20 to 30 percent.

"The difference with the ultrasound/MRI fusion," Pugliese said, "is that I can better 'visualize' which areas of the prostate need to be sampled. This is a multidisciplinary approach with an experienced radiologist" who identifies and digitally marks the suspect tissue on the MRI before the actual biopsy.

The urologist moves the ultrasound probe around the prostate while the fusion software shifts the overlaid MRI image, already marked by the radiologist, giving the medical team a real-time, 3-D ultrasound/MRI view. They use the fused image to guide the biopsy needles precisely to the tissue indicated as suspicious, rather than poking around a pre-determined grid, hoping they find something.

"This is an exciting new approach that yields a lower false negative rate than

see **3D VIEW** on page 7

Rounds

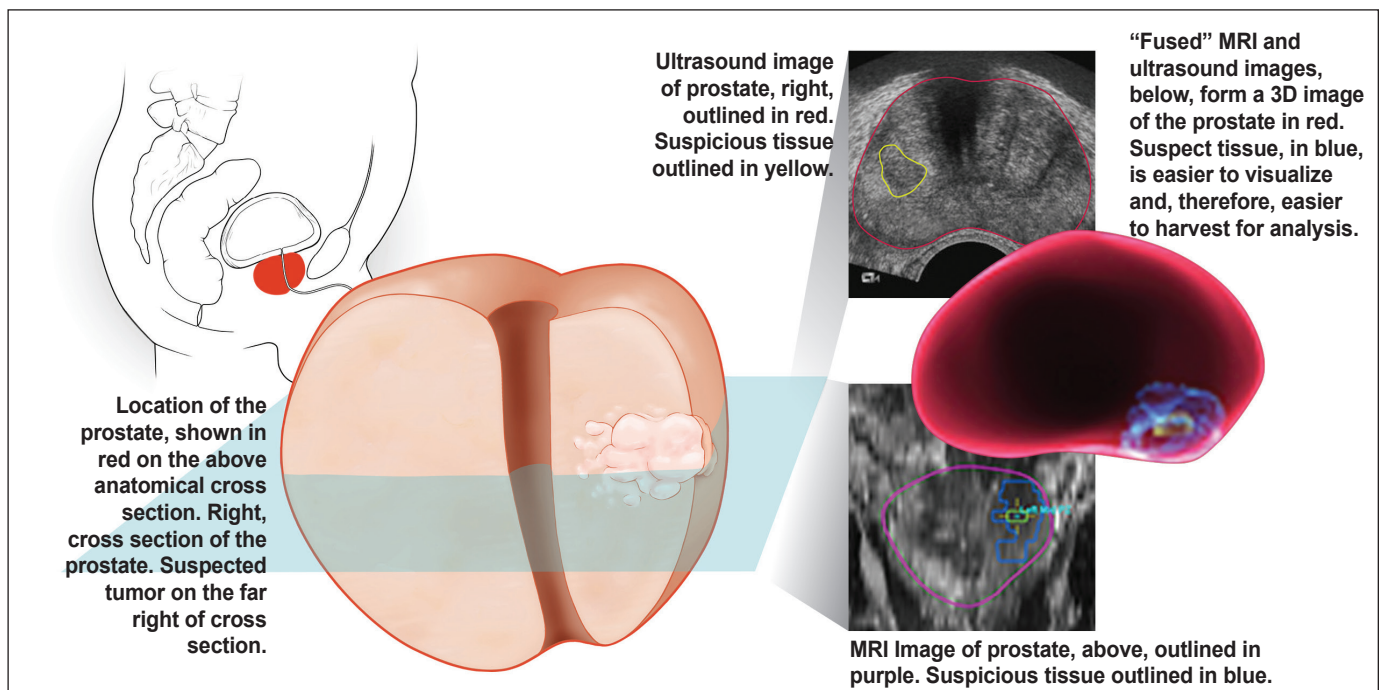


Illustration by Julie Devi Coats, MS, CMI

To harvest a sample of a suspected cancerous tumor for analysis, the urologist must visualize the prostate by feeling the organ with a finger. An ultrasound wand increases the ability to visualize the prostate but, when fused with an MRI image pre-marked by a radiologist, finding and harvesting the suspected tissue for analysis is vastly improved.

3D VIEW from page 6

standard template biopsy and has a higher likelihood of identifying clinically significant prostate cancer,” Pugliese said. “It is simply a more accurate prostate biopsy.”

According to the ACS, “prostate cancer is the second leading cause of cancer death in American men, behind lung cancer. About 1 man in 41 will die of prostate cancer.

“Prostate cancer can be a serious disease, but most men diagnosed with prostate cancer do not die from it. In fact, more than 2.9 million men in the United States who have been diagnosed with prostate cancer at some point are still alive today.”

The earlier prostate cancer is diagnosed, the better the long-term prognosis is for the patient and the more likely a curative treatment will be successful. Curative treatments can include radiation and surgery. Hormone therapy, immunotherapy and chemotherapy are typically reserved for advanced or metastatic prostate cancer. Active surveillance can even be offered to patients with low risk or very low risk disease, avoiding active treatment all together.

Early and reliable diagnosis is key to sorting out the appropriate treatment and, thanks to the ultrasound/MRI fusion procedure, it’s easier to get an accurate diagnosis sooner.

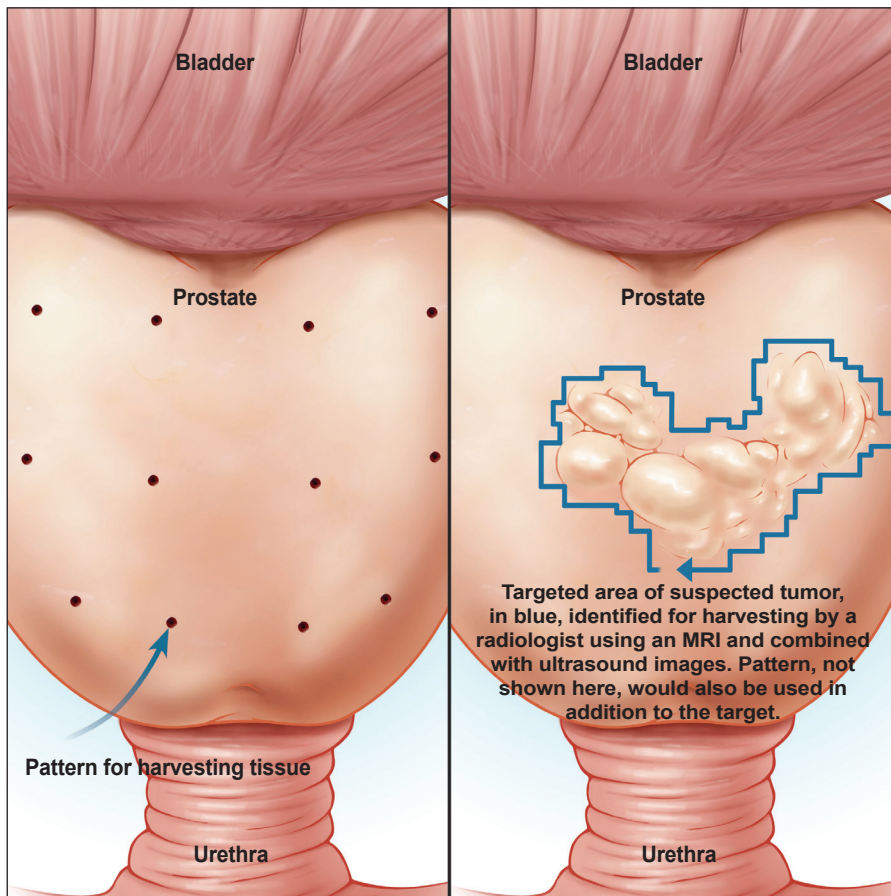


Illustration by Julie Devi Coats, MS, CMI

The traditional method, left, for sampling prostate tissue employs a set pattern of 12 samples. This method is somewhat hit-or-miss in locating a tumor. The “fused” image method, right, allows for targeting specific suspect tissue, identified prior to the biopsy.

RODRIGUEZ ARMY HEALTH CLINIC

Members of the Rodriguez Army Health Clinic, Fort Buchanan, Puerto Rico, celebrate with 2nd Lt. Alejandro Figueroa after his commissioning ceremony Nov. 21.

The Health Care Administration Services Consultant to the U.S. Army Surgeon General and former RAHC Commander, Lt. Col. Eli Lozano, performed the commissioning. Figueroa currently serves as a DA civilian referral clerk at RAHC, and he is looking forward to serving in the Medical Service Corps as a 70B Health Care Administration officer. (Photos by Magda “Grissel” Rosa, USAG Buchanan PAO/RELEASED.)



Reboot your new year

Capt. Rex Hipp
Chaplain

Eisenhower Army Medical Center

As a chaplain for many Army units, the first of the year brings many visitors to my office for counseling and guidance, seeking to improve their relationships with family, friends and co-workers. Their desire is to begin a new year with a clear conscience and a healthier state of mind.

Many will say, "Chaplain, I desire to reboot my New Year." Many of us look at the new year as a time to reboot our lives from misspoken words, unhealthy lifestyles, and even the desire to lose a few pounds from that extra serving of pie we enjoyed

**'How can I
experience healthy
change that will
bring me joy?'**

throughout the holidays.

The big question we may ask ourselves is, "How can I experience healthy

change that will bring me joy?"

My theology teaches that personal change starts within a person's heart with a to desire change that can only be accomplished by God's grace.

God's grace empowers us to grow, change and experience true joy that will provide us the ability to stand strong through life's storms.

I encourage us all this new year to seek out daily devotional time with God, by asking ourselves how we can improve as a person. Some topics may be: to be a better spouse, a more caring person/caregiver, a deeper listener to our families, friends, etc.

I encourage you to press, "CTRL, ALT, Delete" this new year, when it comes to your spiritual life and see where God's guidance leads you.



You are Cordially Invited to the

118th Army Nurse Corps Anniversary Celebration

Saturday, Feb. 2
10 a.m. to 1 p.m.

DoubleTree by Hilton Hotel Augusta
2651 Perimeter Parkway
Augusta, GA

Brunch will be served at 10:45 a.m.
Active Duty: Class A Uniform
Civilians: Business Casual

Please contact 1st Lt. Abigail Tiongco
for ticket information:
Abigail.g.tiongco.mil@mail.mil
(571) 421-7189

Kindly R.S.V.P. by:
Monday, Jan. 14

"Faces of the Army Nurse Corps"



Pajamas with Santa

Eisenhower Army Medical Center's Family Readiness Group held its annual Pajamas with Santa event in Ike's Cafe Nov. 30 in conjunction with the lighting of the Christmas tree on the hospital grounds. Santa and Mrs. Claus visited and took copious notes about Christmas wishes from the children of EAMC family members. Surely by now these wishes have been delivered, unwrapped and throughly enjoyed.



Photos by John Corley



Safety officers involved in more than safety

Bob Meloche

Safety Manager

Eisenhower Army Medical Center

I frequently get asked to comment on the role of a Safety professional in health care. Allow me to offer some insight.

Safety is a different issue in health care, as compared to general industry. In the general industry, Occupational Health and Safety Administration compliance is king, and takes most of the efforts of the safety professional to ensure compliance. That isn't the situation in health care. While OSHA compliance is still important, it doesn't take nearly as much of the safety professional's efforts as Life Safety does. The main reason why is you have patients that are non-ambulatory and incapable of self-preservation in the hospital in the event of a fire. You also have 5 or 6 different agencies (Joint Commission, Centers for Medicare and Medicaid Services, MEDCOM, Rodriguez Army Health Clinis, Fort Gordon fire inspector) that expect you to comply with the National Fire Protection Association 101 Life Safety Code, and they frequently inspect our facilities

The whole concept of Life Safety pertains to getting out of the building alive if it is on fire. In other words, the Life Safety Code is primarily (but not wholly) building oriented. This translates to the Safety professional working hand in hand with the hospital facilities management team. This way, if the Safety professional needs assistance in changing something at DDE-AMC, he/she already has a certain built-in cooperation because the facility person is directly involved with the Safety Office.

The Safety professional is a person who is often seen walking through departments and clinics, ensuring visibility with Eisenhower Army Medical Center's staff. The Safety professional builds a positive relationship with others, ensuring they are seen as a resource, not a hindrance.

Construction, renovation and maintenance activities often compromise life safety codes. Fire suppression systems are temporarily taken off line, resulting in the need for a fire watch, or fire exits doors may be blocked,

causing the rerouting of egress paths.

Safety professionals ensure patient, staff and contractor safety — and fulfill TJC compliance requirements — through a comprehensive interim life safety measures program that compensates for deficiencies.

In a complete life cycle approach, we assess the risks to life safety, and train our staff and contractor personnel. We study every phase to identify hazards and determine preventive measures. Throughout the project, we audit life safety procedures to verify compliance with both TJC policies and your own standards.

The world of hospital safety is constantly changing, whether it's complying with new requirements from CMS and The Joint Commission, being ready for a natural disaster, or dealing with violence in the emergency department, EAMC Safety provides assets and knowledge designed to assist in reducing risk, ensure regulatory compliance, and train the staff.

Ask any hospital safety manager who's recently gone through a survey from The Joint Commission what will they do next, and the answer will certainly be simple and to the point: Prepare for the next one.



November

Patient Safety Employee of the Month

Patient Safety Division

Jelata Renee Pryear, medical support assistant in the Internal Medicine Clinic, was nominated to receive the Patient Safety Award for November.

Pryear received a call at the front desk from a home health care RN about one of Eisenhower Army Medical Center's geriatric patients living in an assisted living facility.



Photo by David M. White

Jelata Renee Pryear, medical support assistant in Eisenhower Army Medical Center's Internal Medicine Clinic, center, is recognized Dec. 3 in the clinic as the Patient Safety employee for November by Col. David Ristedt, commander, Eisenhower Army Medical Center, while her husband, Manford Pryear, looks on.

The patient had an oxygen saturation of 81 percent which is critically low and can indicate a life-threatening medical condition.

The home health RN wanted to leave a message for the patient's primary care manager however Pryear quickly assessed the seriousness of the situation and realized the patient needed immediate emergency intervention.

Pryear alerted the patient's PCM who told the home health care RN to call EMS and have the patient brought to the emergency room for immediate assessment.

The EAMC team continued to follow the patient until the patient was brought to EAMC's ER. The patient was about to have a heart attack and was admitted to in-patient care.

Pryear's quick thinking, unshakable dedication to patient care, and willingness to go above and beyond to protect EAMC's patients, prevented what would have been a poor patient outcome and potentially a morbidity.

A command presentation took place Dec. 3, recognizing Pryear for her outstanding commitment to delivering 5-Star health care.

TRAINING from page 5

and missions with this unit.”

Training that occurred over the two-week period included setting up the hospital tents and associated infrastructure, loading and unloading patients from a UH-60 Blackhawk helicopter, individual and unit-level training on field medicine equipment, qualification ranges and multiple mass-causality exercises.

During the exercise, the 115th Combat Support Hospital was also recognized by local military and political leaders for celebrating its 100th year of providing medical treatment to soldiers on the battlefield.

CANCER from page 4

- A Cancer Registry that collects cancer data and treatment results
- Distress screening and access to supportive resources
- Available genetic evaluation and counseling services
- Education and access to clinical trials
- Ongoing disease surveillance and follow-up care
- Survivorship planning and support
- Provision of timely referral for palliative support and end-of-life services

During the fiscal year of 2018, the EAMC cancer committee continued to provide and facilitate patient screening education opportunities. They also collected and monitored quarterly cancer screening data and identified areas to improve breast cancer screening compliance. This directly relates to early detection, early treatment and increased survivability. The chart on page 4 reflects EAMC's cancer screening data during Fiscal Year 2018 and are measured using the benchmarks for breast, cervical and colon cancers. For example, the solid blue line depicts breast cancer screening compliance in our facility while the broken blue line depicts the breast cancer screening *benchmark standard.

The breast cancer benchmark during the first quarter was 81.60 percent. Our facility exceeded the screening benchmark with compliance measurements equaling 83.29 percent. However, there was observed an ongoing drop in compliance that required attention to prevent a further decline. As a result, EAMC took action to implement performance improvement measures to address this decline.

Measures include

- Identifying those due for screening, contacting/informing patients of same
- Patient follow-up with a mailed reminder
- Increasing the number of available screening appointments
- Implementing a self-referral screening option.

The success of EAMC's efforts and increased compliance will be measured by the data collected during the first quarter of 2019. Currently, EAMC exceeds the compliance standard for the three cancer screening programs for breast, cervical and colon cancers. The Cancer Committee is continually striving to exceed the benchmark standards for the provision of 5-Star cancer care.

References:

Cancer Program Standards 2012: Ensuring Patient-Centered Care:

**National Committee for Quality Assurance Standards; www.ncqa.org*



Eisenhower
Army Medical Center

We are Eisenhower
WE KEEP OUR NATION READY



Maj. Jessica Arnold, deputy director, Practical Nurse Course, at EAMC since May 2018, a soldier for 11 years



Natalie Chambers, RN, nurse educator, Hospital Education and Staff Development, at EAMC since 2008



Staff Sgt. Chester L. Widener, NCOIC, Practical Nurse Course, at EAMC 2 years, a soldier for 12 years



1st. Lt. Abigail G. Tiongco, med/surg staff nurse, 11 West and Progressive Care Unit, at EAMC and a soldier for 2 years

