

IACH Informer



Issue 4

August 2005

Mammography—by Jan Clark



Connie Wade, RT (R) (M), Mammographer performs a mammogram on a patient in IACH's Radiology Department.

Found in full compliance with the Mammography Quality Standards Act (MQSA) during its most recent inspection by the Federal Drug Administration (FDA) on July 27, 2005 Irwin Army Community Hospital began offering mammograms in 1981.

Women's health issues, once dictated by their doctor, are now being controlled by women themselves. The trend shows women have, at long last, become more aware of their bodies and their health. They have become proactive, and nowhere more noticeable than in regards to mammograms.

Connie Wade, R.T. (R) (M) (Registered Radiologic and Mammography technologist) tells of how, in 1978, a woman was laid on an xray table where the compression paddle was held in place on the table top by a suction cup. The film was placed on either side of the woman's breast and the mammogram taken. "Looking back at those mammograms it makes you

wonder how we ever found anything to treat," remarks Wade.

She continues, "Advances in technology are overwhelming. There is now x-ray film made specifically for breast tissue, and used for nothing else. Entire imaging systems designed solely for mammograms, with processors dedicated to optimize mammogram images.

What many don't realize is that mammograms are the most regulated modality of all radiology examinations. They are monitored by the Federal Drug Administration (FDA) and follow the standards of the Mammography Quality Standards Act (MQSA). The FDA inspects yearly, at which time all quality assurance records for machinery, film/cassettes, processor, physicians and technicians are examined."

An important point for women to remember: "Detecting change between exams is an important part of the radiologist's search for cancer. Since mam-

mograms are not included as part of the medical records, it is extremely important for women to get their previous mammograms from outside radiology departments so comparisons can be made," states Wade.

Many times after screening a mammogram a woman will be called back for additional imaging. This may be special view mammograms or an ultrasound. This doesn't necessarily mean there are findings suggesting cancer. It is most frequently that more images are needed to draw a conclusion. Wade continues, "Good compression, though uncomfortable, is of utmost importance. With good compression we can see things as small as a grain of sand.

If there is cancer, and it is found at that state, the prognosis is very good. That's why good compression is so very important."

Irwin Army Community Hospital performs an average of 150 mammograms monthly. Appointments are scheduled normally within 10 days. Results are sent to the patient's doctor and a letter to the patient explaining the results.

While Wade wants to remind women that breast health care is more than just a mammogram, she states, "It is just as important for a woman to do a monthly breast self-exam and have a yearly breast exam by a medical professional. Beginning at age 40 women should have a screened mammogram once every 12 months. A physician must order the exam first, and then the patient can call the clinic directly at 785-239-7911 to schedule their appointment."

The Women's Health Center Opens Soon!



Above are photos of nearly completed rooms in IACH's new Women's Health Center (formerly known as Women and Infants Care Center). On the left is a labor, delivery, recovery and post partum room, while on the right is a post partum room. An Open House is tentatively scheduled for September 30. More details will follow in the Fort Riley Post.

Patient Safety By Anita Frye

If you or a family member have any concerns regarding the safety or quality of your care or environment while in our hospital, please notify either the Chief of the Customer Service Division*, the Chief of Quality Management**, the Joint Commission Readiness Officer***, or myself, the Patient Safety Manager****. We are also ready to assist you if you experience problems with your care in the network.

When you see your health care provider or pharmacist discuss how allergies, alcohol, over-the-counter drugs, vitamins, herbs, supplements or other remedies might affect prescribed medications. Knowing that you may use one of the above may make a difference in what medications you are prescribed and can certainly affect a safe, healthy outcome for you. It is very helpful if you keep a list of all medications you take with you at all times, how often you take them and the dosages. I have been embarrassed more than once, as a nurse, when my healthcare provider has asked me the dosages of my medication and I can't remember. That is when I started keeping a list with me, as it is very important to the care that you are seeking. If you have an emergency and are in pain or even unconscious the list becomes even more valuable in helping you get well.

Always store medicines as instructed, understand how and when medicines should be taken, follow dosage instructions exactly and call a healthcare provider if side effects or new symptoms occur. All of these instructions affect how the medication will work or not work for you and your loved ones.

If you have a hectic schedule (and everyone seems to these days) set up a system for taking your medications. Use a daily log (which can be as simple as a calendar) to keep track of the time, amount, type and dosage of each medicine that you take or give to your loved ones. If you must seek additional health care this information is extremely valuable for the next provider that sees you; either in a clinical setting, an emergency room or a telephone call.

Common over the counter medications can have very bad affects on you if you do not take them as directed on the label. If you do not understand the label, don't take any chances. Contact the pharmacist and/or your healthcare provider.

If you or your family member does not read English and the instructions are in English, please come to the hospital. We have a language line with almost every language imaginable. These specialists are **certified** in medical knowledge to assist you. Go to your Primary Care Clinic and ask to be connected to the language line. Also, if you do not understand your provider and/or pharmacist, they also have access to the language line. Please let your family member know about this service before you deploy. We want to do everything possible to prevent medication errors.

*Chief of Customer Service Division: Mr. Chris Lowery 239-7103

**Chief of Quality Management: Ms. Deanna Wolnik 239-7368

***Joint Commission Readiness Officer: Mr. Darrell Foreman 239-7708

****Patient Safety Manager: Ms. Anita Frye 239-7345

GOLD CARD INFORMATION

By Michelle Barrer

We want to thank you, our patients, for your continued support of the Gold Card Program. With your cooperation we have identified 395 new health insurance accounts. When you come to the hospital, please be sure to bring the Gold Card that was mailed to you so another DD Form 2569- Third Party Collection Program—Record of Other Health Insurance Form does not need to be filled out, unless there is a change in your insurance coverage.

By law, each patient must fill out this form and have it filed in their medical record, whether or not they have other health insurance coverage. If you do have other health insurance, please update your information with your insurance carrier annually. The annual forms sent to you by your insurance carrier must be completed and returned or they will not pay any claims. This not only delays payment to IACH but to your outside providers as well.

Current gold cards expire on 30 September 2005. On your next visit to IACH you will have to fill out a new insurance form. We will mail you a new orange card. Please be sure to fill out the form as accurately as possible with a date and signature. Forms without a signature are null and void and are discarded. For those patients who filled out new insurance forms after June of this year, we are issuing the new orange card. All orange cards are effective until 31 December 2006.

If you have any questions or need our assistance, our staff is located on the second floor of the hospital, in the Uniform Business Office, around the corner from the hospital chapel. We can be reached by phone at 239-7031, 7725, or 7636.

Accept differences . . . Be kind . . . Count your blessings . . . Dream . . . Express thanks . . . Forgive . . . Give freely . . . Harm no one . . . Imagine more . . . Jettison anger . . . Keep confidences . . . Love truly . . . Master something . . . Nurture hope . . . Open your mind . . . Pack lightly . . . Quell rumors . . . Reciprocate . . . Seek wisdom . . . Touch hearts . . . Understand . . . Value truth . . . Win graciously . . . Xeriscape . . . Yearn for peace . . . Zealously support a worthy case. . .

Diabetes Foot Care

Podiatry

For those with diabetes, taking an active role in your health care, to include foot problems, can prevent serious complications. Because diabetes can damage nerves, you may not realize a small cut or blister until it becomes a large sore. Diabetes can also reduce blood flow so it is harder and takes longer for an injury to heal. Because high blood sugar impairs the ability of your immune system to resist invading germs, your risk for infection is increased.

Infections can lead to serious complications requiring toe, foot or leg amputation. Daily examinations can help avoid some problems by spotting them early. Although you should have your feet examined by a doctor yearly you can check your own feet every day. Using your hands and eyes check for bruises, cuts, blisters, cracking, peeling, wrinkling or ulcerations. Redness, red streaks, swelling, color changes and ingrown toenails are potential problems.

If you're unable to see any part of your foot, use a mirror or ask a family member to help you examine your feet. Though some small cuts or bruises might heal on their own it's always wise to consult a healthcare provider if you find any of the above during your self examination.

Athlete's foot is one common fungal infection. It can occur between the toes, at the toenail or sides and soles of your feet. Signs to watch for are itching or cracking, peeling and wrinkling of the skin. Bacterial infections may cause redness, red streaks, warmth, swelling, drainage, pain or pus. If you have any of these signs of infection seek medical care immediately. Minor problems can lead to major ones if left untreated.

Another common problem with diabetes is foot ulcers. These begin as a minor injury, such as a cut. With the possibility of decreased sensation due to nerve damage you might not initially realize there is a problem. Foot ulcers are commonly found on the ball of the foot or bottom of the big toe, but can occur anywhere. If not properly treated they can become infected and progress into open wounds that can spread to the bone. Difficult to treat, ulcers may lead to amputation. This is why treating with an over-the-counter medication is not effective. Possible treatment would include cleaning, bandaging, a medication and possibly a cast or special shoe to help protect the injured area.

Prevention and self-care can help you avoid foot problems and lead a healthier life. If you have any questions or concerns, please do not hesitate to call our Nurse Advice Line at 239-DOCS (3627). They will help answer your questions or refer you for an appointment with our Podiatrist, Dr. Richard Elliston.

For appointments call (785) 239-DOCS (3627) or 1-888-239-DOCS (3627)

Visit TRICAREonline.com for patient information/Ft Riley website/Services/Medical, Health for IACH Intranet Information

October's Retiree Appreciation Day Plans in the Works

It's that time again . . . Retiree Appreciation Day is scheduled for Friday, October 14 at Riley's Conference Center.

IACH will support the event with an on-site Health Fair. Below are some of the many sections/services that will be provided:

- Blood pressure screening
- Nutrition counseling/information
- Cataract screening
- General Health Advice—Preventive Service Guidelines
- Women's Health
- Environmental Health
- TRICARE Information
- Medical information & Pharmacy services
- Exercising safely
- Proper shoe wear/foot exams
- Stress reduction

As the date approaches, further information will be forthcoming in the post and local papers. We hope to see you there!

Flu Season

Flu season is just around the corner. Attacking the respiratory tract, or the nose, throat and lungs, the influenza virus usually appears suddenly and may include symptoms such as fever, headache, tiredness, dry cough, sore throat, nasal congestion and body aches.

IACH offers the flu vaccine yearly to all TRICARE beneficiaries. The Fort Riley Post and this newsletter will announce the arrival of the flu vaccine. Appointments will be scheduled at that time.

September is National Cholesterol Education Month

Cholesterol Month 2005 extends the theme "Know your cholesterol numbers, know your risk." This theme emphasizes two of the main thrusts of the cholesterol guidelines; the importance of having your cholesterol measured and knowing your risk of developing heart disease.

Simple steps to help reduce your risk are:

- Get a fasting lipoprotein profile to find out what your total cholesterol, LDL cholesterol, HDL cholesterol and triglyceride numbers are
- Discuss your risk for heart disease with your physician or other health care provider and take steps to reduce the risk factors
- Learn how to read a food label—choose foods that are low in saturated fat, trans fat and cholesterol
- Calculate your body mass index (BMI) with the BMI calculator and see how your weight measures up
- Participate in physical activity of moderate intensity—like brisk walking—for at least 30 minutes on most, and preferably all, days of the week. No time? Break the 30 minutes into three, 10-minute segments during the day
- Don't smoke. If you do smoke, contact your healthcare provider to discuss ways in which they can help you quit (IACH's Preventive Medicine Division offers tobacco cessation classes—call 239-DOCS to sign-up)

The Department of Pathology performs a panel test in-house that evaluates a person's Lipid Profile. Patients should arrive between 7:30 and 8:00 a.m.. Accurate laboratory testing regarding the Lipid Profile request a fasting specimen. Patient instructions may be picked up at the reception desk in the Laboratory.

Community Efforts . . .

- Happy/Adventure Meals/etc.: We need your help! We are collecting the cute little toys that come with the fast food chains' kid meals. They are being passed on to the local Crisis Center. We have found that often times children are forced to abandon their homes and are unable to take along any of their own toys. These little kid meal toys are perfect—small enough for a child to put in his/her pocket, and giving that child something again of their own. This small contribution costs us nothing and could mean so much. Won't you join us in this campaign? (Call Jan Clark, Public Affairs Officer, 239-7250).

- Pull for the House Pop Tab Recycling Program. Here again is an opportunity to extend a helping hand to others less fortunate. Just save those pop tabs and turn them in to Jan Clark, PAO, 1st floor, room 1-N-7.

- Any other ideas for community support, just call 239-7250. Thanks in advance for your support!

Physical Therapy Webpage!

IACH's Physical Therapy Clinic has a patient education webpage. To get a wide variety of information visit the site at: <http://iach.amedd.army.mil/departments/phyTherapy.asp>

The Secretary of the Army has determined that publication of this periodical is necessary in the transaction of the public business as required by law of the Department. Use of funds for printing this publication has been approved by the MEDDAC Commander. The views and opinions expressed in the periodical are not necessarily those of the Department of the Army or of the publishing agency or command.

"IACH Informer" is published by Irwin Army Community Hospital, Public Affairs Office, 600 Caisson Hill Road, Fort Riley, KS 66442, DSN 856-7250, Comm (785) 239-7250, by permission of Colonel Marilyn Brooks, Commanding. Editor is Jan Clark. This is a bi-monthly publication distributed to IACH's beneficiaries on a handout basis & via the Intranet.