



THE POINT

A newsletter for and about the people of the
U.S. Army Medical Research and Materiel Command

*Inside this
issue . . .*

NEWS

**Team plans
facilities
overseas—1**

**Stress fractures
researched—3**

**Command
diagnosing
"leish"—5**

**Farm helps with
homeland
security—6**

**Chaplains to use
medics' tool—8**

**Command opens
exhibit—10**

**Center gets new
home—11**

**PEOPLE IN THE
NEWS—12**

Facility team improves care in combat zone

As a nurse helping to design Fort Bragg's medical center in 1995, Lt. Col. Sharon Steele never envisioned she'd be taking that expertise into a combat zone. But after joining the Health Facility Planning Agency in 1999 and leading trips overseas to help create or improve health facilities, she's hooked.

"Everybody is motivated to make these new facilities the best possible, given the resources, for the soldier," she said. As a clinical planner on the agency's Special Medical Augmentation Response Team, she and other team members visited Iraq, Afghanistan and Kuwait last year to share their expertise in planning health care facilities.

"We figure out what is needed: all the utilities, equipment, what services, where the rooms go and what type of construction, where it should be placed on the site, where the helipad should be, what climactic conditions will influence the design, the geographical and the combat conditions," Steele said.

She and the team also have to consider the local population's needs as well, because more than half of the care provided in U.S. and coalition hospitals in Afghanistan or Iraq is for the local population.

"We have a lot of clinical problems in taking care of the local populations in Afghanistan and Iraq because there are so many cases of tuberculosis and other infectious diseases," Steele said. "Our DEPMEDS (deployable medical systems) hospitals are designed to be big wards in a tent. If we have someone who's infectious, that's a real issue."

The team also takes into account local cultural norms. For example, men in both Afghanistan and Iraq don't want to be in the

same wards as the women and children being treated.

The team will take on any task to help improve medical care. In her most recent trip to Kuwait, for example, her team offered advice to the staff of a medical and dental facility built by the Kuwaitis for the team's use, because its work wasn't flowing well.

"It was occupied before it was finished, so it hasn't been occupied the way it was designed," she said. "There were dental rooms in three places in the clinic and logistics rooms in two. It was all over the lot."

After analyzing the situation, the team left recommendations to the staff on possible fixes, which are based on the team members' expertise in working on brick-and-mortar hospitals and consulting with a team of architects, mechanical engineers and health facility and equipment planners at the headquarters in Falls Church, Va.

In Iraq, though, both the work and the working conditions were tough as the team tackled designing a hospital inside a warehouse for Abu Ghraib prison. Planners decided on building a concrete box inside the warehouse for two reasons: detainees can't climb out through the ceiling, and it also protects the patients and equipment from dust, a real problem for health care workers in Afghanistan, Iraq and Kuwait.

The team employs the lessons it learned in Kosovo, such as bringing in semi-permanent modular medical units, like trailers, that can be moved by truck, plane or ship to Iraq.

"It's a pretty inexpensive type of construction that is good for our clinical function," Steele said. "And if we decide that we're

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Health Facility team members at the Balad Hospital in Iraq are, from left, Lt. Col. Robert Rhodes, Lt. Col. Sharon Steele, Chief Warrant Officer John Burgess, and Chief Warrant Officer Chris Phillips.

“Team” continued

ready to move on to another place, we can pick it up and move it.”

Steele’s introduction to Iraq was bumpy at best. Upon its arrival in Baghdad, the C-130 transporting her and her team detected incoming fire and did “an awful lot of exciting maneuvers” and the pilot shot off flares, she said.

“At all times, you’re well aware you’re in a war zone,” she said. “I really have a lot of empathy for the people who are there for long periods of time. You must kind of get used to it, but I can’t imagine you ever would.”

Lt. Col. John Michael Olson, an architect with expertise in engineering and facilities management, spent nearly six months in Baghdad as part

of a Special Medical Augmentation Response Team working as a member of the Coalition Provisional Authority. He and other facility planners from HFPA spent their days working with the Iraqi Ministry of Health to help establish health care processes and the system.

“The goal is to help the Iraqis improve and sustain the condition of health care facilities so the health care system will work better and the health of the population will get better ... not to put an American system in Iraq,” he said.

What made his job tough at first was the Iraqi planning and engineering staffs he worked with didn’t use decision-making processes when it came to the health care system.

“They were more accustomed to a dictatorial, just-do-it type of process,” Olson said. “They didn’t know how to establish criteria or evaluate options to determine the best course of action. It’s all new to them, because in the past it appears that most decisions were made for them and all they did was execute them.”

The entire experience, Olson said, was “fascinating,” and gave him an opportunity to see that what he does “really matters in a bigger role than just having a health care system be more efficient or effective.”

“What we really were doing was helping a whole country and society have hope for a better life,” he said.

Lab tackles problem of military stress fractures

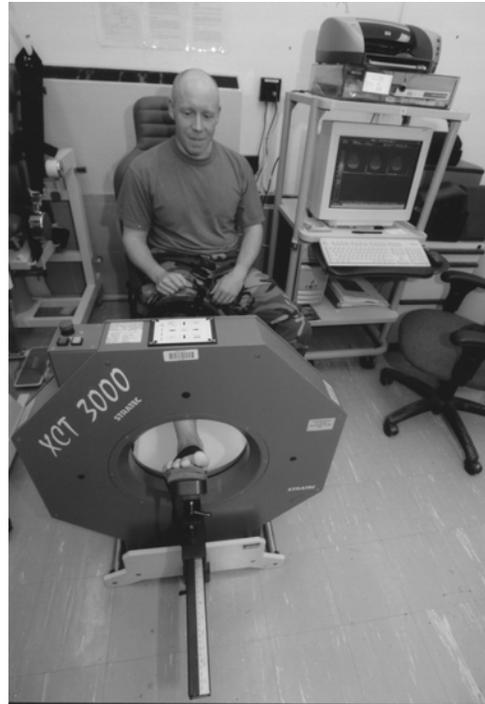
Stress fractures caused by repetitive pounding activities of physical training take a toll on enough of the military population, specifically recruits, that a major research program called “Bone Health and Medical Military Readiness” was started in 1997 to solve the problem.

With a collection of the latest research tools acquired in the past year, the Bone Health and Metabolic Laboratory at the U.S. Army Research Institute of Environmental Medicine, located at the U.S. Army Soldier Systems Center in Natick, Mass., is ready to examine its piece of the puzzle.

“The goal of the whole program is to ultimately eliminate stress fractures,” said Maj. Rachel Evans, a research physical therapist and director of bone health research. “Stress fracture cases have been reported since the late 1800s and today are one of the most common and potentially debilitating overuse injuries seen in military recruits, particularly in women.”

Stress fractures occur when muscles transfer the overload of strain to the bone, most commonly in the lower leg, and cause a tiny crack. They’re tricky to see on X-ray and disrupt physical training, sidelining troops while costing the Defense Department as much as \$100 million annually in medical costs and lost duty time, Evans said.

Funded in part by Congress through the advocacy efforts of the National Coalition for Osteoporosis and Related Bone Diseases, and the American Society for Bone and Mineral Research, and managed by USARIEM, overall research is multifaceted, examining factors such as gait mechanics, impact attenuation



Spc. Heath Isome is scanned for bone density and geometry on the peripheral quantitative computerized tomography machine in the bone health lab.

and genetics. USARIEM research physiologists are studying specifically how exercise and nutrition influence stress fractures.

“A systematic approach to the study of stress fracture was needed but hadn’t been done,” Evans said. “With this focused effort, and recent breakthroughs in technology, we’re hoping to come up with science-based strategies to identify individuals at risk for stress fracture, and then prevent their occurrence through innovative training interventions.”

Col. Karl Friedl, USARIEM commander, earlier in his career led a study on bone health at Fort Lewis, Wash., and said the understanding of bone physiology is significantly advancing and has widespread ramifications on health.

See “Bones,” page 4

“Bones” continued

“There has been no program in the DoD that paid attention to bone health in the past,” Friedl said. “Anything we can provide has the potential to save millions of dollars and enhance readiness through reduction in lost duty time, attrition from the military and medical cost avoidance.”

Noninvasive methods of studying bone health at USARIEM started in the early 1990s with the first Dual Energy X-ray Absorptiometry machine to measure bone density. Still in the lab, the older DEXA machines have been superseded by the superior software and scanning times in

a new Prodigy fanbeam bone densitometer, said Robert Mello, a research physiologist and the lab director.

The Prodigy scans total body bone density in 5-inch instead of 1-inch increments, increasing precision and cutting

scan time from 30 minutes to six minutes. Improved software provides a clearer picture of total body composition and bone mineral density.

“We can look at regional areas of interest, such as sections of the tibia, forearm or hip,” Mello said. “Before you had to scan an entire area.”

While the Prodigy gives a front-to-back, two-dimensional view, the peripheral quantitative computerized tomography machine allows researchers to analyze 3-D cross sections of spongy and outer bone. It’s designed to reconstruct a volumetric model of bone, from which bone density, and for the first time, bone

geometry, can be determined, Evans said.

Another scanning instrument is the handheld ultrasound bone sonometer, which examines bone quality by measuring the speed of sound of ultrasonic waves transmitted along the bone.

The results can then be used as an aid in the assessment of bone strength. “We can identify bones that may be at risk,” Mello said. “The big thing is the portability so that it can easily be taken to the field.”

Evans said the information they learn can apply to any population of physically active people to help prevent stress fractures.

Four studies by USARIEM are planned in the next year to try to answer how muscle structure and function relates to bone quality.

Researchers will examine whether differences in bone density and geometry exist between the right and left tibia, and look at how that changes through physical training. One objective is to find the proper training balance, to see where bone strengthening ends and weakening begins.

Another study will look at the effect of three 12-week exercise programs—aerobic training, strength training and a combination of the two—against a sedentary control group. “We want to look at what factors might build up bone,” Evans said. “Maybe we can give (recruits) a program before going to basic training to ward off problems.”

Building on what they’ve learned in the experimental study, the plan is to transfer that information to actual basic combat training units to examine what risk factors, such as slender bones or low bone density, predispose trainees to injury.

—Curt Biberdorf, Natick Public Affairs Office



Spc. Heath Isome is scanned on the Prodigy DEXA machine as Spc. Daniel Catrambone sits at the control station.

Command's experts combat leishmaniasis

A little-known parasite that causes chronic, festering sores is returning home with some of Operation Iraqi Freedom's warfighters

Cutaneous leishmaniasis, which affects the skin, is caused by a sand fly bite that deposits the parasite that eventually causes weeping sores that don't heal as quickly as regular sores.

"The majority of these are lesions on the face or on the hands over joints. So in the short term, it's just not pleasant to have a lesion that won't heal potentially for up to a year—and some of these get quite large," said Lt. Col. Peter Weina, a "leish" expert at the Walter Reed Army Institute of Research. "In the long term, the problem is the scarring, which can be disfiguring if it's on the face and can limit movement of the hands if it's over a joint."

Iraq's sand flies are most active during warm nights from March to October, so troops on the move during Operation Iraqi Freedom were right in the middle of "Sand Fly Central."

"In the march up to Baghdad, people would literally fall asleep on their HUMVEE or out in the middle of the desert, so we had enormous amounts of exposure in the evenings in areas where there were a lot of sand flies," said Col. Alan Magill, another of Walter Reed Army Institute of Research's experts on leishmaniasis.

Leish experts suspected the disease was going to be a problem for troops, but until Weina arrived in theater to serve with the 520th Theater Army Medical Laboratory, they didn't know just how big the problem was. Initially sent to look for weapons of mass destruction, Weina's team also looked for common diseases in the area, like

leish, to see what risk they posed to warfighters.

By April 2003, fears were confirmed.

"We found sand flies in the area and started testing them and found some extraordinary infection rates in the flies," he said. "We expected to find maybe one tenth of one percent of the sand flies to be infected with leishmaniasis, and we were finding two percent of the sand flies were infected in some locations."

Finding that amount of infected sand flies meant a huge increase in the potential number of cases, so Weina and his team went into full prevention mode.

"We went to units and talked to everyone from the commander on down to the private. They needed to know that the best thing to do with this disease was to prevent getting it in the first place," he said. "We did everything from stand-up comic routines out in an opening in the middle of tents, all the way to full briefings in conference rooms."

Though travel was hazardous, Weina's message to the audiences he reached was simple: Wear DEET insect repellent so sand flies don't bite; use permethrin, a pesticide, on uniforms to keep sand flies away; and sleep under mosquito nets that have been treated with permethrin.

The discovery of the leish problem coincided with the war, so getting the word out on the disease wasn't easy, Weina said.



Cutaneous leishmaniasis is caused by a sand fly bite that deposits a parasite that eventually causes weeping sores that don't heal as quickly as regular sores.

Facility helps homeland security

Operated for more than 20 years by the U.S. Army Medical Research Institute of Infectious Diseases, the Large Animal Research Facility is home to valuable assets in the fight against bioterrorism.

Ten of the farm's goats are currently enrolled in a homeland defense program that harvests antibodies for tests to rapidly detect the top 10 biothreat agents.

"The reason for the rapid diagnostic test is because some of the agents that are used, you don't want to be messing around with them, especially if you need to get (a patient) on treat-

ment or decontaminate them," said Maj. Len Murray, the officer in charge of the farm.

The goats get a shot each month so they will produce the antibodies for the tests.

"They're in no danger of getting the diseases they're producing antibodies for," said Murray, who ran a large animal vet practice in North Carolina before joining the Army. "They just receive proteins that stimulate their immune systems to make antibodies,

See "Farm," page 7

"Sores" continued

"I tried to get the attention of the brass above me ... but their concerns weren't about the guys sleeping under bed nets but making sure they weren't going to get killed."

He and his team also talked to the medical professionals in the area so they'd be on the lookout for leish.

"The problem is that some (lesions) look like any other type of sore that you may have with a bacterial infection, but they just don't get better," Weina said. "We treated with antibiotics first. Then if the antibiotics failed, we considered leishmaniasis."

Because the disease is difficult to diagnose without a lab and experts equipped to look for it, all leish smears were initially sent to the Walter Reed Army Institute of Research for confirmation. The institute, in fact, has the only leishmaniasis lab in the country that is accredited by the College of American Pathologist and is operated in accordance with the Clinical Laboratory Improvement Act.

The ability to deliver a diagnosis lets the lab cross the boundary that typically exists between research and health care, Magill said.

"Though the (institute's leishmaniasis) research program was eliminated (in 1996), the lab was maintained for just the scenario being played out today," he said.

Weina and Magill traveled to posts with large numbers of returning troops—like Fort Campbell, Ky.; Fort Hood, Texas; and Fort Carson, Colo.— to let the troops and the medical professionals there know what to look for.

"The only problem is, like with most of tropical medicine, the expertise to make the diagnosis is not well distributed. To physicians and lab technicians at Fort Campbell, this is not something many of them have seen in their entire careers," Magill said.

The good news, he said, is the lesions do heal, even without any treatment. The bad news is healing can take up to a year without effective treatment.

"In the natural history of these lesions, if you do nothing, even for the worst lesions, they will get better, Magill said. "But cosmetically this is very damaging. If you're walking around with some of these big lesions on your face, psychologically there's a big impact there. This is an operationally acquired disease, and it's our job to address that."

"Farm" continued

just like humans when they get flu shots."

As hip hop music blares inside the barn on a brisk winter morning, veterinary technician Pfc. Reese Baker, dressed in a winter farming outfit of insulated coveralls over his uniform, helps his noncommissioned officer in charge, Spc. Edwin Picado, take blood samples from the penned goats whose antibodies will be harvested the next day.

After a day of observation to make sure the 10 goats are healthy, the goats become blood donors. At the outset of the program, the veterinarians decided that pheresis—a method of separating plasma from red blood cells and returning the red cells to the donor—was the route to take because the program needed only the antibody-rich plasma.

"It takes about 30 days for these guys to regenerate the red blood cells if we take the whole blood. We would have ended up throwing the red blood cells away and putting the goats at risk for acute anemia crisis because of their low red cell levels. If we only take the plasma, they can regenerate the plasma and proteins in about a week," Murray said.

The pheresis machine is on-site at the farm, so the goats stay in familiar surroundings. When they enter the sanitized pheresing room, the goats are put in a suspended sling that has four leg holes for the 30-minute session.

Kicked off in September 2003, the critical reagents program will have 50 to 80 goats when it's fully operational. Twenty-one Nubian goats recently joined the herd farm in January, and a few more will arrive in the spring.

In the midst of muck from melting snow in the barnyard, the goats are so clean they look more like entries in a county fair than barnyard goats.

"If you're a goat at USAMRIID, basically all you have to do is give



Maj. Len Murray, the veterinarian charged with running USAMRIID's farm at Area B, delivers much-appreciated scratches to one of the horses in the paddocks. Some of the institute's horses are retired from funeral duty at Arlington National Cemetery.

blood every couple weeks and otherwise be treated like you're a queen," said Lt. Col. Carol Eisenhauer, chief of the Veterinary Medicine Division at USAMRIID.

Keeping the animals in top shape benefits both the animal and research results.

"If you start with a sick animal or an animal that's under a great deal of stress, you're not going to get really good research results," she said. "Our business is humane animal care and good research, hand in hand."

In fact, the division has about 70 people—veterinarians, veterinary technicians and animal caretakers—all dedicated to caring for the farm animals as well as the institute's other animals, which include monkeys, rabbits, mice, hamsters and guinea pigs. The division's \$3.2 million budget supplies the animals' food, bedding, medical supplies, cages and toys as well as salaries and training for the staff.

"I love animals and I feel strongly that I'm an animal advocate, and I feel strongly that my job is to make

See "Farm," page 8

Chaplains to use medics' tool

If personal data assistants are the wave of the future for military medical providers, then chaplains are getting ready to surf.

When the Army's Chaplain Corps discovered that the designer of a medical data device had included room for their notes, they started seeing the value of capturing information electronically instead of jotting it down in pocket notebooks with stubby pencils.

Designed by former Special Forces medic Tommy Morris, the Battlefield Medical Information System-Tactical, or BMIS-T, is a handheld tool for medics to track the care soldiers receive at the point of care, get advice on diagnosis and treatment, access volumes of medical reference material and order supplies.

In designing the application, Morris, who works at the Army's Telemedicine and Advanced Technology Research Center, said the chaplain's three data fields were built in up front.

"We didn't anticipate the Chaplain Corps using it so much as the providers on the ground, but it's a really good example of the folks in the field having a real requirement to do these things and then ... saying this will fit that need," he said.

Currently, when a medic pulls up a soldier's record in the BMIS-T, the application automatically finds the soldier's religious preference.

"Even if you've got an unconscious patient, the chaplain should be able to

See "Tool," page 9

"Farm" continued

sure research is appropriate for the animal and that they're respected," Eisenhower said.

Her staff and the institute's scientists regularly meet to ensure research projects involving animals comply with the regulations that govern animal research in government labs.

"Investigators have a lot of time invested in their research—it can take 10 years to develop a vaccine—and they know if they don't do everything right, it won't pass FDA inspection and the vaccine will never be out there to help people," she said. "The last thing they want to do ... is have a flawed study because they didn't take care of their animals properly."

All the animals at the farm are precious commodities for medical research, and not just for USAMRIID. Sheep blood is harvested to make blood agar plates for the labs at the Walter Reed Army Institute of Research and

the U.S. Army Medical Research Institute of Chemical Defense. Goose blood is shipped to USAMRICD for West Nile virus research.

Eisenhower said animal medical research helps not just humans but animals as well. Operations like kidney and heart transplants that were pioneered on animals for humans are now available for pets at major veterinary schools.

She saw this firsthand when her daughter needed an emergency laparoscopic appendectomy this summer.

"That would not have come about if they had not learned how to do that and develop that technique on animals," Eisenhower said. "Ten years earlier when they developed the technique I had the opportunity to help physicians learn how to do that when I was at Tripler (Army Medical Center). It helped to possibly save my daughter's life."

“Tool” continued

look at the screen and see that ‘This person is Catholic, or Muslim or Jewish’ and either provide some spiritual intervention at that point or go find someone who can,” said Maj. James Duke, a chaplain who works with the Army Medical Department’s combat developer for all things pastoral.

To mirror the information collected on a field medical record, Morris devised drop-down menus for any intervention a chaplain might perform—like saying a prayer, hearing a confession, giving communion, baptizing or giving last rites or the rite of the sick—to speed up record keeping. He also included a line for a signature and date and a small space to record notes.

Documenting what’s done for soldiers spiritually helps the Chaplain Corps communicate with their superiors. Commanders regularly want statistics on how many soldiers a chaplain sees and what issues troops are dealing with, so an electronic device can simplify that chore. Discussions about when the device will be deployed are currently ongoing.

The BMIS-T can also help the corps communicate within its own ranks.

“We’re hoping the chaplain on the receiving end will be able to pick up the fact that an intervention was done and what it was, so the chaplain can go in the door of the patient’s room and continue the spiritual intervention, rather than starting all over again,” Duke said.

“That’s a really good thing, especially if we’ve got a confession of faith or baptism, because then we’ve got a lot of good stuff to work with and we can begin from there to talk about hope and faith and how that contrib-



Chaplain (Capt.) Mike Allen, second from left, of the 232nd Medical Battalion, uses the Battlefield Medical Information System-Tactical at a simulated Battalion Aid Station at Fort Sam Houston, Feb. 25. The BMIS-T is a handheld tool for medics to track the care soldiers receive at the point but can also be used by the Chaplain Corps to capture notes on what spiritual care is provided.

utes to healing.”

Duke sees the BMIS-T as a tool for chaplains in the States to use in the future when they must notify families their loved one has died. Though chaplain interventions today are recorded on forms called casualty feeder cards, the paper forms usually don’t make it to the casualty assistance officer or chaplain charged with delivering the news.

“When I have to notify a spouse or parents, I would love to be able to say ‘Ms. Smith, your husband died of his wounds, but before he died, I can tell you he was with Chaplain Jones who prayed over his body and presented him to God.’ What a comfort that would be to a family,” Duke said. “We don’t have access to that kind of information right now.”

Partnership exhibit opens at museum

A 91 Whiskey medic might seem out of place stationed a few feet from a Civil War-era morgue.

But a new exhibit highlighting modern Army medical capabilities at the National Museum of Civil War Medicine in Frederick does make sense after all. The exhibit opened

May 7 after a ceremony attended by community leaders and Fort Detrick proponents.

The exhibit is a product of the educational partnership between the U.S. Army Medical Research and Materiel Command and the museum. The

exhibit features a mannequin dressed and equipped as a current medic would be, displays of medical products developed by the USAMRMC, and a short video about the command and its contributions to medical readiness of the Armed Forces.

Robert E. Gearing, president of the National Museum of Civil War Medicine, said the partnership is “highly valued by the museum. The partnership gives both parties the opportunity to share technology, history and artifacts through displays, lectures and exhibits.

“The museum provides educational opportunities for military medical professionals, and enhances their appreciation of what their counterparts were faced with and

endured 140 years ago,” he continued. He added that the partnership and the command’s new exhibit help the Frederick community better understand the importance of Fort Detrick to the military.

Gearing thanked Jay Winchester, USAMRMC general counsel, Craig Lebo, USAMRMC principal assistant responsible for contracting, and Maj. Mike Blount, USAMRMC secretary of the general staff and partnership committee chairman, for their efforts to establish and sustain the partnership and to bring the new exhibit on line.

“Represented here so incredibly well are the basic principles of medical support on the battlefield that were developed and validated from the Civil War,” said Col. John Ball, commander, U.S. Army Garrison, Fort Detrick. “The basic principles of forward evacuation, forward treatment, triage—we use those principles to design units today. The objective division that is in design today, the medical support piece, is built around exactly the same principles.”

Frederick County Commissioners Mike Cady and Jan Gardner presented a certificate of recognition from the County Commissioners. They congratulated the museum and the USAMRMC on the successful partnership and on the opening of the new exhibit.

State Senator David Brinkley read a proclamation from the Maryland State Senate, similarly congratulating the museum and the command on the success of the partnership.

—Chuck Dasey, U.S. Army
Medical Research and
Materiel Command



Officials from the Fort Detrick, Frederick and Maryland welcomed the unveiling of the new exhibit at the National Museum of Civil War Medicine.

Ribbon-cutting ceremony marks different beginning

Ribbon-cutting ceremonies typically mark a new beginning for organizations moving into a new building, but a ceremony held in February at Fort Sam Houston symbolized a second chance for all Army facilities in danger of being demolished.

Through recently passed legislation, “enhanced leasing” The U.S. Army Medical Information Technology Center made history by becoming the first tenants of the North Beach Pavilion. Enhanced leasing allows the Army to save many of its threatened buildings by having private developers renovate, sublease and return historic buildings back to the Army after 50 years.

North Beach is one of three buildings that are being restored for the project called “The Offices at Fort Sam.”

“No one ever expected USAMITC to actually move on post. We waited years for this to happen,” said Lt. Col. Jose Lopez, commander of USAMITC.

Although USAMITC was scheduled to move back on post in 1990, the lease was not signed until 2003. During this 13-year waiting period, a myriad of quagmires pushed the move date back. After years of paperwork and legislation, USAMITC signed its lease, and construction finally began.

The Spanish-Baroque building was constructed in 1931 as barracks for soldiers and was later converted into a hospital. It was abandoned and closed in 1996.

Although developers had to respect the historic nature of the building, their mission was to transform the rodent-infested and flooded Army facility into a secure and modern office that is well-suited for one



The new home of USAMITC, above, and a before shot, below.

of the most advanced high-tech computer centers in the world.

USAMITC provides information technology system health solutions for the Army’s Medical Department, which comprises the Army’s medical facilities and commands. By developing, deploying and sustaining the AMEDD’s systems, USAMITC enables the AMEDD to better manage the day-to-day health care of its soldiers.

Months have passed since North Beach reopened, and USAMITC couldn’t be happier with its “new” facility. The three acres that not so long ago enclosed a rundown pediatric wing now contains a historically restored office with modern enhancements. For example, where there once was a flooding basement, now stands a state-of-the-art computer room that operates 186 servers.

The U.S. Army South Command will be the next tenant of the “Offices at Fort Sam” project and is scheduled to move into the former Brooks Army Medical Center at the end of April 2004.

—Cynthia Hernandez, U.S.
Army Medical Information
Technology Center



People in the News

Wolfowitz Presents Purple Heart to Soldier Wounded in Iraq

Deputy Secretary of Defense Paul Wolfowitz presented the Purple Heart at the Pentagon March 26 to Col. Elias Nimmer, who was wounded when the Al



Deputy Secretary Paul Wolfowitz presented the Purple Heart at the Pentagon March 26 to Col. Elias Nimmer.

Rasheed Hotel in Baghdad came under attack by Iraqi insurgents last October.

Wolfowitz, who also was staying in the hotel during the Oct. 26 attack, met Nimmer at

the 28th Combat Support Hospital, where Nimmer and four others who worked for the Coalition Provisional Authority were treated for serious injuries from the attack.

Nimmer, assigned to the Office of the Assistant Secretary of the Army for Acquisition, Logistics and Technology, was the only servicemember hospitalized.

As Wolfowitz presented Nimmer the Purple Heart, he recalled how inspired he had been by Nimmer's commitment to the coalition mission in Iraq.

When the two men first met, Nimmer was being administered oxygen and was receiving treatment for shrapnel injuries to his spine, nerve damage and a perforated eardrum. Wolfowitz said he asked Nimmer, a native of Beirut, Lebanon, how he felt about re-

building a new Middle East. Nimmer, who asked the medical staff to remove his oxygen mask so he could meet the deputy secretary, responded with a "thumbs up," Wolfowitz said.

Nimmer's wife, Leann, said she attributes her husband's upbringing in a war-torn country with giving him the instinct to immediately roll from his bed onto the floor when the first rockets hit the hotel just after 6 a.m. He remained facedown on the floor as a barrage of rockets hit the hotel, one impacting directly inside his room, 916.

During the ceremony, Wolfowitz praised Nimmer as an example of the "tremendous courage" that all members of the armed forces exhibit on a daily basis as they take the front lines in the war on terror.

Wolfowitz said Nimmer also typifies the "extraordinary contributions" immigrants have brought to the United States and to the U.S. military.

"This is a day I will remember as long as I live," said Nimmer as he accepted Purple Heart. He thanked his coworkers and the medical community for its part in helping him recover.

Nimmer was taken to Landstuhl Army Medical Center in Germany the night of the attack and continues to receive treatment at Walter Reed Army Medical Center in Washington.

Following three surgeries, Nimmer is back to work at the Pentagon.

—By Donna Miles, American Forces Press Service

People in the News

Army Retiree Still Going Strong

Studies show that senior citizens can increase their strength and vigor by picking up some form of moderate exercise. Sixty-five year old Cliff Manis, the DNS administrator for the U.S. Army Medical Information Technology Center and the U.S. Army Medical Command, maintains his strength by preparing for, competing in and winning several national weightlifting championships.

In his latest test of strength March 13, Manis won a first-place gold medal at the 2004 USA Powerlifting Military National Weightlifting Championships competition in Killeen, Texas. The annual USAPL weightlifting competition is established for active military members, reserves, National Guard and retired soldiers to compete in age and weight categories.

Power weightlifting is a drug-free strength sport and, Manis said, “is lots of fun.”

In the masters (male) 65-69 age group and at his 206 pound weight, Manis benched 213 pounds, deadlifting 402.2 pounds, and squatting 335 pounds and placed first in his master’s group in the overall competition.

Manis was also part of a nine-member team named “South Texas Power Team” at the meet in Killeen. His team won second place overall at the meet.

Although looking at Manis’s physique, one would guess that he’s been weightlifting since he was 18. Actually, he stepped into a gym three years ago.

“I began weightlifting to try to lose weight. I initially lost 48



Cliff Manis, right, of the U.S. Army Medical Information Technology Center won a first-place gold medal at the 2004 USA Powerlifting Military National Weightlifting Championships competition in Killeen, Texas.

pounds, but some of the weight I retained turned into muscle instead of fat,” he said.

Although Manis lost the weight he needed with the extreme exercise regimen, he also acquired a love for the sport and began competing in and winning several USAPL competitions in Texas. To prepare for the championships, Manis works with John Hendrix, a trainer for lifting weights and exercise at the Randolph Air Force Base gym one-and-a-half hours, five days a week.

Manis’s next big weightlifting venture is to join the U.S. Team competition in August. He’ll continue to demonstrate that picking up any new exercise regimes and maintaining one’s vigor and strength is possible at nearly any age. More information may be found at www.usapowerlifting.com and www.usapl.texas.org.

—Cynthia Hernandez, U.S.
Army Medical Information
Technology Center

MRICD mourns death of top scientist

Employees at the US Army Medical Research Institute of Chemical Defense were shocked and greatly saddened recently by the death of coworker Dr. Robert E. Sheridan Jr.

MRICD commander, Col. Gennady E. Platoff, in his eulogy, called Sheridan “a shining star.”

As a token of his respect, admiration, and friendship to Sheridan, Platoff presented the Sheridan family with his commander’s coin, which is reserved for special occasions to acknowledge excellence in performance.

“I sincerely believe I speak for all of the MRICD when I say that Bob was one of our brightest, most enthusiastic, and most accomplished scientists and research coordinators,” Platoff said.

Sheridan began his association with the institute in 1986. His research activities included studies of the mechanism of action of various biological neurotoxins and neurotoxic chemicals on nerve and muscle physiology. As a principal investigator, Sheridan made many significant scientific contributions and authored or co-authored more than 40 research manuscripts and five book chapters.

In May 1998 Sheridan used the knowledge gained through his research activities to make a difference for world peace and volunteered for a term as a chemical and biological weapons inspector in Iraq with UNSCOM

(United Nations Special Commission).

“Bob’s considerable intelligence and intellectual curiosity led him to constantly expand his repertoire to new techniques and areas of research, most recently to behavior and molecular biology,” said Dr. Tony Shih, acting chief of the institute’s Pharmacology Division.

At MRICD, Sheridan will be remembered as an extremely dedicated scientist who always approached his work very seriously and conscientiously, as well as one who, despite his own heavy workload, was always willing to discuss scientific problems and to provide valuable advice and assistance.

“He brought not only much enthusiasm and insight to his work, but also a special brand of warmth, humor, and class to his interactions with friends and coworkers,” said MRICD’s Dr. Michael Adler, a close friend of Sheridan’s and a fellow principal investigator.

Sheridan lived with his wife, Susan, and their two children, Brendan, 16, and Arianne, 12, in Catonsville, Md.



Dr. Robert E. Sheridan worked as a neuroscientist in USAMRICD’s Neurotoxicology Branch since 1988.

People in the News

Lab dedicates building



Alice Neel and Maj. Gen. Lester Martinez-Lopez pose in front of the plaque at the dedication ceremony.

The U.S. Army Aeromedical Research Laboratory dedicated its building April 2 in honor of Maj. Gen. Spurgeon H. Neel, a soldier, physician, visionary, and leader. Maj. Gen. Lester Martinez-Lopez, commanding general of the U.S. Army Medical Research and Materiel Command, the lab's parent command, served as master of ceremonies as the building was named the Neel Aeromedical Science Center.

Alice Neel, Neel's widow, unveiled the bronze plaque dedicated to her husband.

Neel, a Memphis native, was actively involved in field and

aviation medicine. He established a formal program for board certification in aviation medicine for Army medical officers and created Army aviation medical training and research programs.

Regarded as the father of Army aviation medicine, Neel envisioned a research facility charged with the mission of providing direct aviation medical research support to all Army aviation and airborne activities. His goal was realized in 1962 with the creation of the U.S. Army Aeromedical Research Unit at Fort Rucker. The general's vision grew into today's U.S. Army Aeromedical Research Laboratory, a center of excellence devoted to world-class research on health hazards of Army aviation, tactical combat vehicles, selected weapons systems, and airborne operations.— *By Linda M. Burt, U.S. Army Aeromedical Research Laboratory*

Distinguished award

Fort Detrick Commanding General Maj. Gen. Lester Martinez-Lopez received the prestigious Woodrow Wilson Award for Distinguished Public Service at the Johns Hopkins School of Public Health convocation May 19.

The award is given to alumni who bring credit to the university through their current or recently completed service to the public as an elected or appointed official. Previous winners of the award include

Antonina Novello, surgeon general of the United States; Madeline Albright, U.S. ambassador to the United Nations; and John Hamre, deputy secretary of Defense.



Maj. Gen. Lester Martinez-Lopez receives the Woodrow Wilson Award May 19.

Soldier of the Year

Spc. Anton V. Faustmann from the U.S. Army Medical Research Institute of Infectious Diseases was named Soldier of the Year of Fort Detrick March 4 for his outstanding performance in the 2003 U.S. Army Garrison NCO/SOY competition.



Faustmann

At the luncheon in his honor Faustmann received the Army Commendation Medal, Army Achievement Medal, the Fort Detrick plaque and command coins. Other presentations included the combat medic statue from First Command; the well-being coin; a certificate for outstanding achievement and check for \$250 from the Directorate of Community Services; a Fort Detrick ornament and check for \$500 from the Fort Detrick Community Auxiliary; and a \$75 gift certificate from the Post Commissary.

"This is pretty cool... Hooah!" Faustmann said, adding his thanks to the USAMRIID Soldiers for coming out to support him.

Long Timers

A dozen employees from U.S. Army Medical Research and Materiel Command headquarters received longevity awards recently.

Jose Laureano hit the 30-year mark on Sept. 9, 2003; Charlene Stitely reached the 30-year milestone on Nov. 4,

2003; and Merrie Houck reached her third decade of civil service Feb. 2.

Those who have 25 years of civilian service include Cynthia Minnick on Sept. 9, 2003; Clifford Wendel on Sept. 25, 2003; Linda Reese on Sept. 27, 2003; Judith Eyler on Nov. 16, 2003; and Michael Sult on Nov. 27, 2003.

Celebrating 20 years of service are Juanita Livingston on Aug. 18, 2003; Patricia Modrow on Oct. 3, 2003; Theresa Shipe on Nov. 6, 2003; and Anthony Kakiel on Dec. 15, 2003.

Bronze Star, promotion

Lt. Col. Coleen Martinez of the U.S. Army Medical Materiel Development Activity received the Bronze Star medal May 25 for her service as the Coalition Forces Land Component Command Surgeon liaison officer to Coalition Joint Task Force 7 in support of Operation Iraqi Freedom from July 2, 2003, to Feb. 23, 2004.



Col. Coleen Martinez gets her new rank from her husband, Lt. Col. Mark Martinez.

Martinez, a microbiologist assigned to the U.S. Army Medical Materiel Development Activity here, initially was sent to the theater as a member of a medical team that would provide products to prevent and treat cases of botulism, at a time when the botulinum toxin was considered a high threat as a weapon of mass destruction.

People in the News

“She did such a good job that they kept her,” said Maj. Gen. Lester Martinez-Lopez, commanding general of the U.S. Army Medical Research and Materiel Command, who presented the award to Martinez.

Martinez’s second honor came June 4 when she received the rank of colonel in a ceremony here. Her husband, Lt. Col. Mark Martinez, pinned on her new rank.



Nimmer

Commendation Medal

Col. Elias Nimmer of the Office of Medical Systems, Assistant Secretary of the Army for Acquisition, Logistics and Technology received the Joint Service Commendation Medal May 25 for serving as the chief of resource management for the Office of the Coalition Provisional Authority–Ministry of Health in Baghdad from July 10 to Oct. 27 2003.

“He fought his way to go to Iraq to help build the health infrastructure there,” said Maj. Gen. Lester Martinez-Lopez, commanding general of the U.S. Army Medical Research and Materiel Command, who presented the award. “He believed he could really make a difference.”

Group Achievement

Maj. Robert von Tersch, deputy director for Research Plans and Programs, received the Office of the Secretary of Defense Group Achievement Award May 25 for his contri-

butions in support of the Oil-for-Food Task Force from May to September 2003. The major worked to ensure Iraqi financial assets were used widely to meet the needs of the Iraqi people and the reconstruction of Iraq.

“This shows you the reach of the AMEDD (Army Medical Department) because here we had a young major working in the State Department,” said Maj. Gen. Lester Martinez-Lopez, commanding general of the U.S. Army Medical Research and Materiel Command, who presented the award.

Certified

Regulatory Affairs Scientist Kathy Mantine was recognized May 25 for receiving her Regulatory Affairs Certification in April. The certification is similar to becoming board qualified in a medical specialty.

“This is a recognition of her excellence, because we’re going to pay her the same whether she’s certified or not,” said Maj. Gen. Lester Martinez-Lopez, commanding general of the U.S. Army Medical Research and Materiel Command, who presented the award. “Why bother (getting certification)? Because it’s an internal issue that says we’re good and we demonstrate that we’ve got what it takes to be excellent.”



von Tersch



Mantine

People in the News



Chance encounter

Capt. Robert Carter of the U.S. Army Research Institute of Environmental Medicine ran into Massachusetts Senator Ted Kennedy at Logan Airport in Boston April 17 when Carter was on his way to the experimental biology scientific conference in Washington.



Eitzen

Retired

After a 33-year career, Col. Edward Eitzen Jr., a former commander of USAMRIID, retired from the U.S. Army while assigned to the Department of Health and Human Services in a ceremony at Fort Detrick March 23. Half of his career was spent at Fort Detrick where he established the Operational Medicine Division at USAMRIID in 1991. He was the commander of USAMRIID from 2000 to 2002.

“USAMRIID was the pinnacle of my career, and it will continue to be central to the biological warfare threats,” Eitzen said.

Lt. Col. Patrick Byrne concluded his 23-year career from the Office of the Surgeon General, but



Byrne

worked with the U.S. Army Medical Materiel Agency. He completed the internship course at USAMMA in 1989, then returned to serve in several divisions and finally as the chief of staff.

After 30 years of Army service, Col. John Frazier Glenn retired June 17. Glenn has served at Headquarters, U.S. Army Medical Research and Materiel Command, Fort Detrick, Md., in a series of positions of increasing responsibility since 1992. As he retired, Glenn served as the deputy for

Research and Technology with executive-level responsibility for technical direction and oversight of Army and Defense medical research and development programs in infectious disease, military operational medicine, combat casualty care and medical chemical and biological defense.

Col. Gerald Parker, former commander of the U.S. Army Medical Research Institute of Infectious Diseases, retired in June after 26 years of service. He most recently served as director of the National Biodefense Assessment and Countermeasures Center.



Glenn



Parker

People in the News



Mitchell

Bright future

Sgt. Adrienne Mitchell of the U.S. Army Aeromedical Research Laboratory at Fort Rucker, Ala., is headed to Old Dominion University in August to earn a degree in nursing and an Army commission. Since 1996 she's served as a medical laboratory technician, and she said she jumped at the chance of pursuing her dream of a nursing career when she learned about the Army's Enlisted Commissioning Program.

The program provides eligible soldiers an opportunity to complete a bachelor of science degree in nursing in 24 calendar months, become a registered nurse and be commissioned in the Army Nurse corps.

While attending school, soldiers continue receiving their current pay and allowances, and school costs are paid by the program. After commissioning, soldiers attend the Army Medical Department officer basic course at Fort Sam Houston, Texas, for about 10 weeks before being assigned as army nurse corps officers.

"For soldiers interested in taking the same path I say go for it, and if at first you do not succeed, dust yourself off and try again," Mitchell said.

Sgt. Audie Murphy Club inductee

Staff Sgt. Gary Bush was inducted into the Sgt. Audie Murphy Club May 13, the sixth anniversary of his enlistment

into the Army.

Bush is a medical laboratory specialist at USAMRIID, where he supervises four soldiers. During his four years at the research facility, he has worked with anthrax, plague, glanders and ebola.

Bush is applying for a commission as a medical technology officer and plans on getting a master's degree in microbiology.

"I consider it an honor to be recognized with a group of non-commissioned officers that embody the ideology of Sgt. Audie Murphy's selfless service in taking care of soldiers," Bush said. "Leading and training soldiers has so far been the greatest honor of my life."

New assignment

Col. Lisa Weatherington, deputy chief of staff for personnel, U.S. Army Medical Research and Materiel Command, left in June for her new job as the deputy chief of the Medical Service Corps at The Office of the Surgeon General in Washington.

Brig. Gen. Sheila Baxter was sworn in as the 15th Chief of the Medical Service Corps during the Association of the U.S. Army Medical Symposium in San Antonio May 17. Baxter served as the chief of staff for U.S. Army Medical Research and Materiel Command prior to her last assignment as the Assistant Surgeon General/Deputy Chief of Staff for Force Sustainment, U.S. Army Medical Command at Fort Sam Houston, Texas.



Bush



U.S. Army Medical Research Institute of Chemical Defense winners of the annual Baltimore Federal Executive Board Excellence in Federal Career Awards are, from left to right are Graham, Hott, Murrow, Smith, Oldham, Col. Michelle Ross, Lenz, Marcrum, Rowland, Hurst and Qabar.

Winners

U.S. Army Medical Research Institute of Chemical Defense employees took home several awards from the annual Baltimore Federal Executive Board Excellence in Federal Career Awards program held May 7.

Master Sgt. Brian Oldham won a gold award for Outstanding Supervisor (Trades & Crafts)

Silver awards went to Dr. John Graham in the Community Service category, and Thomas Hott, in the Outstanding Trades and Crafts category

Bronze awards were given to Dr. Charles Hurst for the Distinguished Public Service Career category, to Dr. David Lenz in the Outstanding Professional (Non-supervisory) - Technical, Scientific and Program Support category, Staff Sgt. Joel Marcrum for the Outstanding Para-professional (Non-profes-

sional) - Administrative, Management and Specialist category, Melanie Murrow for the Outstanding Professional (Non-supervisory), Administrative, Management and Specialist category, Maj. Aziz Qabar in the Outstanding Supervisor (GS-12 and below) category, Tami Rowland for the Outstanding Para-professional (Non-supervisory) - Technical, Scientific and Program Support category and Dr. William Smith in the Outstanding Supervisor (GS-13 and above) category.

Promotion

Lt. Col. Beau Freund became Col. Freund June 1 in a ceremony at the U.S. Army Research Institute of Environmental Medicine.



Freund

People in the News



Sgt. Alicia Altman, Spc. Daniel Russell and Sgt. Derron Hopkins of the Walter Reed Army Institute of Research visit with children at a local school.

School days

The Walter Reed Army Institute of Research's participated in a first-ever trip to Potomac Glenn

Day School March 9.

The soldiers—Sgt. Derron Hopkins, Sgt. Alicia Altman and Spc. Daniel Russell—told the children what they do in the military and had a lunch of hot dogs, cookies, chips and soda.

“We went there thinking that we were going to answer a million questions, but the kids did most of the talking, pretty much about themselves,” Hopkins said. “They were very excited to see the people who ‘take care of the bad guys and save the world.’”

The best part was when the children sang “God Bless America,” Hopkins said, “because it was so funny.”

“The kids made me do push-ups,” Hopkins said.

Medallion

Lt. Col. Corina van de Pol of the U.S. Army Aeromedical Research Laboratory at Fort Rucker received the Order of Saint Michael Medallion June 7 for her contributions to Army aviation.

The order began in 1990 as a joint venture between the Army Aviation Association of America and the U.S. Army Aviation Center to recognize individuals who have contributed significantly to the promotion of Army aviation in ways that stand out in the eyes of the recipient's seniors, subordinates, and peers.

Although not a member of the Army Aviation Branch, van de Pol has worked in support of the aviation community throughout her military career. She directed research teams in such diverse areas as sustained operations, situational awareness, crew coordination, electro-optics, night vision goggles, and visual psychophysics

research. As a technical observer on flight status, she has obtained most of her flight hours at night during evaluations and observations of developing night vision devices, laser eye protection and as a technical monitor during refractive surgery flight assessments.

She also served as the USAARL research optometrist and has authored or coauthored eight USAARL technical reports and more than 30 articles related to vision and aviation.



Van de Pol, right, received the Order of Saint Michael Medallion June 7 for her contributions to Army aviation

Safety first

Carol Hyde is the new U.S. Army Medical Research and Materiel Command safety manager. She comes to the command from the Naval Hospital at Bethesda, Md., where she was the director of safety for the hospital complex.



Smalls

Number one

Sgt. 1st Class Lee Anna Smalls was thrilled to learn she was selected as the distinguished honor graduate from a class of 28 soldiers at the Advanced Noncommissioned Officer Course, Fort Jackson, S.C. Smalls, a personnel service specialist with U.S. Army Medical Research and Materiel Command, graduated May 18. “It was challenging, but I did it,” Smalls said.

Research poster winner

Maj. Aziz Qabar, chief, Advanced Assessment Branch, U.S. Army Medical Research Institute of Chemical Defense, and his coauthors, Marian Nelson, Juanita Guzman, and Charlene Corun, won the Best Research Poster Award at this year’s Society of Armed Forces Medical Laboratory Scientists meeting, recently held in Boston. Qabar and his coauthors won the competition by successfully defending to the judges the data presented in their poster, “A Role for TNF- α /NF κ B Signal Transduc-

tion Pathway in Sulfur Mustard-Induced Cell Death in Human Epidermal Keratinocytes.”

The awards were announced by SAFMLS president, Cmdr. Michael L. Finch, at a special breakfast, which was also attended by Col. David C. Burns, assistant chief of the Medical Service Corps.

“I am so proud of my three research technicians whose hard work contributed greatly to this USAMRICD accomplishment,” Qabar said.

Green to gold

A soldier from the U.S. Army Medical Research Institute for Chemical Defense turned in his enlisted rank for lieutenant’s bars Jan. 9 in a commissioning ceremony at Manassas National Battlefield Park in Manassas, Va.

“I chose it for two reasons: one, I am from Virginia and two, because of Gen. ‘Stonewall’ Jackson, who was a great Virginian and military soldier whom I look up to,” said 2nd Lt. Tony John, a Woodstock, Va., native.

John joined the Army as a specialist in October 1997 with a bachelor’s degree from Virginia Tech in forestry and wildlife resources and a minor in biology. John served as the non-commissioned officer in charge of the Neurotoxicology Branch, Pharmacology Division, at the Maryland institute. He also led the training for the Expert Field Medical Badge and the German Troop Duty Proficiency Badge and was an instructor of the Medical and Field Chemical and Biological Casualty course and

People in the News

led the effort to renovate the land navigation course.

He said everybody at ICD supported his pursuing a commission, but three names stand out. Maj. Maurice Sipos led him to the decision, 1st Sgt. William Cafferky did the work for my commission and COL Gennady Platoff assisted him through encouragement, mentorship and networking.

After completing officer training, John went to Fort Bragg, N.C., to the 32nd Medical Battalion where he serves as the corps Blood Bank Officer.

“When I joined, I didn’t really know the difference between enlisted and officer, I just wanted to be a soldier,” he said. “Wherever I go, I’ll do my best to soldier and take care of soldiers, with God as my supreme commander.”