Captain James A. Lovell Federal Health Care Center

The APOLLO

Readying Warriors and Caring for Heroes

Fall 2020 | Official Newsletter of the Captain James A. Lovell Federal Health Care Center | Vol. 13 Iss. 3

Happy 10th anniversary Lovell FHCC!

Lovell FHCC serves veterans, military patients

Lovell FHCC was dedicated as the nation's first and only integrated federal health care facility a decade ago, during a well-attended ceremony in front of the new ambulatory care clinic and parking garage.

The integration came after nearly a decade of work, beginning with an idea to combine the services of the former North Chicago Veterans Affairs Medical Center and the nearby Naval Health Clinic Great Lakes. Both facilities were in danger of closing after the 1995 recommendations of the Base Realignment and Closure (BRAC) Committee, the Center for Naval Analysis 2002 recommendations and other realignment studies.

Today Lovell remains the only fully integrated federal health care center, employing 3,000 active duty and VA civilian staff.

Lovell FHCC's main hospital in North Chicago is pictured center. Top; left to right, is USS Red Rover, USS Osborne, Fisher and USS Tranquillity branch clinics. Bottom, left to right, are community based outpatient clinics: McHenry, Kenosha, Wis., and Evanston.

Anniversary ...

Capt. Lovell honored to be facility namesake p. 3

Timeline 2008-2020, p. 2-3

Reflections, p. 2-3

Oct. 1, 2010, p. 3

Also, in this Issue ...

Leadership Columns, p. 2 & 3

Employee news, p. 5

ICU preps for COVID-19 onslaught, p. 6

Veteran beats COVID-19, p. 6

Mural celebrates 10-year anniversary, promotes healing

By Jayna Legg
Lovell FHCC Public Affairs

Where others see an expanse of bare concrete walls in the covered walkways between buildings on the sprawling Lovell FHCC campus, FHCC RN Michelle Franklin has always imagined an artist's canvas.

Franklin envisions multiple life-sized murals adorning many of the walls in the walkway system known at the FHCC as the tramway.

"I started asking in 2008," said Franklin, an artist and muralist herself. "Art is healing. It makes you stop and get out of your head."

The "stars aligned," Franklin said, when she joined other FHCC staff members, veteran patients and community muralists to paint a mural in a busy section of the tramway.

The mural gave veterans an opportunity to participate in much needed art therapy during the pandemic, said FHCC Recreation Therapist Elizabeth La Combe, one of the project leaders. "It gives all staff and patients – everyone who walks through the tramway - something beautiful to look at, creating positive feelings for all."

The mural project also is helping the FHCC celebrate its 10-year anniversary this month. A more than 6-foot tall portrait of the facility's namesake - former Apollo astronaut and retired Navy Captain James A. Lovell - appears on the left side. Next is the moon, an Apollo spacecraft, the Lovell FHCC logo, a bald eagle and a serviceman silhouetted in front of a U.S. flag, and finally an image of a veteran being cared for by a provider.

The mural resulted from a partnership between Brushwood Center at Ryerson Woods and the FHCC, and was funded by an Illinois Department of Veterans Affairs Cash Grant and the McCormick Foundation.

"This mural symbolizes the hope and healing that Lovell has committed too since our inception ten years ago," said FHCC Director Dr. Robert Buckley. "We celebrate the veterans and artists who made this project possible, especially Brushwood Center."

Combat veteran and FHCC staff member Romney Dodd didn't hesitate to get involved. Dodd, who served 16 years in the Navy, both enlisted and as an officer in the Nurse Corps, said, "I'm proud of the role I play here at the FHCC and the opportunity to support my fellow veterans, but this project felt like an opportunity to step away from that and do something creative."

Capt. James A. Lovell, FHCC Director Dr. Robert Buckley, FHCC veteran staff member Leticia Knight and Master Chief Nick Noviello cut the ribbon on the mural. Brushwood Center Board Chair Gail Sturm and FHCC Supervisory Recreation Therapist Sean Gartland stand behind. (Photo by Mass Communication Seaman Apprentice Minh-Thy Chu)

Waukegan veteran Jairo Andrade, who also served in the Navy, said painting the mural lines up with what he learned as a FHCC Pain University patient. "I'm guessing this is what Pain University is all about," he said when interviewed during a June painting session. Andrade said Pain University taught him healing and alternative ways to alleviate pain, including changing his diet.

The mural will be unveiled in a virtual ceremony Oct. 29 as one of the FHCC's anniversary events. Lovell visited the FHCC recently to cut the ribbon. While standing in front of his portrait, Lovell joked about how the facility was named after him, as told to him by then-Ill. Congressman Mark Kirk. Turn to page 3 for the naming story.

From the Desk of the Director

Work on integration of VA and Navy hospitals started in 2003

Buckley: 'We did it, and we did it well! I can't wait to see what the future holds for Lovell FHCC'

By Dr. Robert Buckley
Lovell FHCC Director

A lot can happen in 10 years. A lot HAS happened here at the Captain James A. Lovell Federal Health Care Center in the decade since it was opened on a crisp October day in 2010, with VA, VHA and Department of Defense VIPs; many local, state and federal dignitaries; and much pomp and circumstance.

I wasn't here that day, but as some of you know, I served as the commanding officer when I was known around here as CAPT Buckley, 2014-2016. I can tell you we were busy back then doing the same things we continue to do today – going about the honorable business of caring for a group of more than 100,000 patients, totally unique to any other VA or DoD hospital, anywhere, period.

Our patients are warriors: veterans of every age and era; and heroes: our active duty service members and their family members. That group includes the youngest and newest members of the Navy. More than 40,000 of these young people come through the Navy's only "boot camp" every year, and we are the gatekeeper for all their health and dental needs. That's an immense and important job, and until you've gone to USS Red Rover at 4 a.m. to see hundreds of recruits lined up on the mats waiting to get immunizations; have their eyes, ears and teeth checked, and receive preventive health services, you may not fully appreciate the full scope of this operation.

We take on this dual mission – Readying Warriors and Caring for Heroes – with an equally unique, united staff of VA civilians, active duty Navy personnel and contractors, many who work in IT and at our Recruit Training Command Clinic, USS Osborne, which by the way is one of the Navy's largest dental operations, if not the largest. Our staff of more than 3,000 comes together every day, active duty and civilians working side by side, and ensures the integrated patient care is seamless to those we serve.

Integrating made sense more than TWO decades ago, when North Chicago VA Medical Center was in danger of closing its doors for good, while next-door, at Naval Station Great Lakes, the aging Navy hospital building was too old to efficiently renovate and had already been downgraded to a clinic versus a hospital. Some people in high places – then-Illinois Congressman Mark Kirk (later Sen. Kirk), Illinois Sen. Richard Durbin, and others – thought, "Why not?" Why not take care of the full spectrum of military and veteran patients in Northeast Ill. and Southeast Wis. in one place, from the day they sign on the dotted line and raise their right hands to the day they transition off active duty and become veterans, to their golden years, when their needs may be as simple as hearing aids or as involved as long-term nursing care.

Thus, the journey to the opening of Lovell FHCC on Oct. 1, 2010 began. If you've been here some or all of the past 10 years, you know we always have something going on. Just look at how many groundbreakings and ribbon-cuttings we've had, each representing expanded services. This list isn't in a particular order and is not all-inclusive. We opened the VA's first caregiver support center, four Green House homes and a Walk-in Center for Homeless Veterans. We remodeled our Community Living Center, moved our McHenry and Kenosha Community Based Outpatient Clinics into new buildings, and renovated and expanded Hematology/Oncology and our GI Clinic. We opened a state-of-the-art Simulation Center, dedicated a new CLC courtyard, and cut the ribbon on the remodeled Fisher Clinic.

It's been a decade of expansions, openings and changes. Change here is a constant. We've been visited by thousands of VIPs, been inspected and reviewed every which way over the years, restructured our organizational leadership more than once and adapted to the cyclical turnover of our Navy staff and frequent active duty mobilizations. And we've endured and prospered.

We consistently rate high for customer satisfaction and access. From day one, we've worked around substantial technology hurdles and continue to be the pilot site for high-visibility initiatives, such as our recent launch of Defense Medical Logistics Standard Support – eventually to be adopted by all VA medical centers.

We're one-of-a-kind in every way, but I like to think, above the rest in the quality of the patient care we provide. And we do so much more than provide health care to our patients, as evidenced by our commitment to the VA's Whole Health for Life Initiative.

"We're one-of-a-kind in every way, but I like to think, above the rest in the quality of the patient care we provide."

Dr. Robert Buckley
FHCC Director

I'm so proud of what we do to take care of the whole patient, including help for homeless veterans; programming for women veterans and vocational rehabilitation. Our residential programs for patients battling PTSD and substance abuse are widely sought-after. We have countless support groups of every kind, and we provide art, music and many other types of recreational therapy. We helped start Lake County Veterans Treatment and Assistance Court and expanded VTAC to Cook County. I could go on.

We couldn't do what we do without our dedicated staff, our compassionate and generous crew of several hundred volunteers including dozens of veteran service organizations, and our many community partners. This 10-year anniversary celebration is for all these groups and everyone here. We did it, and we did it well! I can't wait to see what the future holds for the Captain James A. Lovell Federal Health Care Center.

Reflections

I have stated at each and every New Employee Orientation that I have facilitated, that we are in a very special place with a very special purpose. Hardly ever in life do you get the opportunity to create something new, to pioneer something. You get to look back and say, "I created that, and I am proud of it." Our vision is to create the future of federal health care, so in 10-minutes, it's the future. If you don't like it and want to improve it, do it. The future of federal health care starts with each of you, right now. So, go out there and show how we put the "Love" in Lovell.

- James "Buck" Hopkins
Supervisor, Continuous Process Improvement /Lean Six Sigma

Having been on active duty in October 2010, I remember the excitement of being a part of a newly created joint federal medical center — mixed in with knowing that things would be rough on our staff during the first several years. What I think made this joint venture work was the fact that we had good people within the VA and DoD who were committed to making this project work to benefit our patient population.

-Ret. Capt./Dr. Norman Lee, Assistant Chief Medical Executive, Chief Medical Informatics Officer

Commanding Officer's Corner

Innovative thinking generated by pandemic

By Captain Thomas Nelson
Lovell FHCC Deputy Director
NMRTC Great Lakes Commanding Officer

Walking through the doors of Lovell Federal Health Care Center as its new commanding officer and deputy director on June 30, I had some set expectations.

I knew the FHCC was a one-of-a-kind facility, the nation's first and only federal health care center in support of a unified DoD-VA mission best described by its motto, "Readying Warriors, Caring for Heroes." And based on discussions with predecessors, including Director Dr. Robert Buckley, I knew my new position would offer unequaled opportunities as well as great challenges.

Now more than 90 days into this new assignment, I am just beginning to fully appreciate the tremendous potential that Lovell FHCC represents, not only for its DoD and VA patients and staff, but as a national model of federal health care. I arrived here amidst COVID-19, which has tragically caused more than a million deaths worldwide, including more than 200,000 in the U.S., and eleven here at the FHCC. However, the vital need to minimize the spread of coronavirus has also sparked a lot of innovative thinking. I have been especially impressed by the ingenuity and proactive thinking generated by new patient and staff needs caused by the pandemic.

Crises have been known to have that effect. Albert Einstein once said, "Let's not pretend that things will change if we keep doing the same things. A crisis can be a real blessing to any person, to any nation. For all crises bring progress."

As just one example, COVID-19 has sparked innovations in the FHCC's management of the military readiness component of our mission, which is my primary focus. Our facility provides care aimed at ensuring that military personnel from all service branches throughout a 16-state region remain medically ready to serve our nation, always.

Comprising a very large element of that population are the 40,000-plus recruits who travel from all parts of the country each year to prepare for Navy service through basic training conducted by the Recruit Training Command at Naval Station Great Lakes. Recruits typically live and work in very close quarters, making the quick spread of contagious disease among them inevitable. The FHCC worked closely with RTC and NSGL to develop strategies that isolate the recrun population and minimize COVID-19's spread among students, staff and military family members at Naval Station Great Lakes, as well as other FHCC staff and patients, and members of outlying communities.

Among them, we now provide routine drive-in COVID-19 testing for Recruit Division Commanders; Navy corpsmen who lead ships of recruits. Hundreds of RDCs have been efficiently tested through this process, which has been instrumental to quick identification of positive cases and timely mitigation needs.

With harsher weather coming soon, the FHCC has begun construction on a permanent drive-in testing structure. While COVID-19 generated the immediate need for the construction, it has great potential for other customer services in the future. We expect the first drive-thru procedures conducted in this all-weather structure will be COVID-19 testing and flu immunizations.

This is just the kind of out-of-the-box thinking that has me excited about the FHCC's potential for truly modeling the long-term benefits for DoD and VA patients and staff that may be reaped through a fully integrated federal health care center.

Reality check: In my short time at the FHCC, I've also experienced first-hand challenges, such as the continued need for a single electronic health records system for both our DoD and VA patients, so providers can devote more time to caring for patients, rather than completing administrative tasks. The FHCC's specific struggles have helped to magnify the urgency of developing a single EHR, which has long been a priority for both DoD and VA.

The FHCC will continue to reflect both the perils and possibilities of its one-of-a-kind model, which may help to guide development of future federal health care centers. I'm proud to be the FHCC's commanding officer in its 10th year, and I'm thrilled to have a role in guiding the facility's second decade of fully integrated health care for DoD and VA patients.

I worked in the Mental Health clinic at Bldg. 200H on the Navy base (2009), before accepting the inaugural Caregiver Support Coordinator position. During the next year while the integration was taking place, the Caregiver Program was also being rolled out. A lot of newness and excitement that year! As for my favorite memory, that is easy! It is the first time I got to meet Captain Lovell. What an incredible Honor!

-Pam Rosentreter,
FHCC Caregiver Support Program Manager

The efforts to merge began years before October, 2010. I received system-level support from the employee wellness group at VHA National Center for Prevention, The Heathier US Veterans Communication Action Committee, and the Health and Human Services President's Challenge group in D.C. and their university contacts who were operating in Indiana. It was truly a chance to combine resources to run a single program with a theme that resonated with the missions and beneficiaries of DoD and VA.

-David Reid, FHCC Health Fitness Coordinator

Just how was FHCC named?

By Julie Ewart
Lovell FHCC Communications Chief

Throughout its first decade, the man whose name graces the Captain James A. Lovell Federal Health Care Center has been an enthusiastic presence at the facility's special events, from its premiere as the nation's first fully integrated VA and Department of Defense health care center to recent virtual celebrations held amidst COVID-19.

The close relationship enjoyed by the FHCC with Captain Jim Lovell – renowned astronaut, retired Navy officer and a local resident – is a source of pride and inspiration for the facility's leaders, staff and patients. But many don't realize how rare it is for the namesakes of federal facilities to live to enjoy that honor.

Recently, Lovell shared the story of how the FHCC got its name as told to him by former U.S. Sen. Mark Kirk, who was instrumental in the facility's establishment. Kirk also gets credit for it being named for Lovell, which then-Congressman Kirk initially proposed to then-Secretary of Defense Donald Rumsfeld.

"Rumsfeld asked, 'is he dead?'" Lovell recounted during a recent visit to the FHCC.

After hearing that Lovell was "very much alive," Rumsfeld reportedly responded that "federal facilities are only named for dead people."

But after Robert Gates became the Defense Secretary in 2007, Lovell said Kirk tried again. "He said, 'Mr. Secretary, we'd like to name this facility after an astronaut, James Lovell, as the facility is very pioneering in everything it's doing, and Lovell was a space pioneer.'"

Gates agreed, and the rest became history on Oct. 1, 2010, when the facility officially became the Captain James A. Federal Health Care Center.

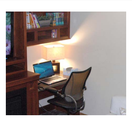
October 1, 2010

Oct. 1, 2010, marked the official dedication of the new Capt. James A. Lovell Federal Health Care Center (FHCC) in North Chicago, Ill. Hundreds attended the ribbon-cutting ceremony, which was held outside the entrance of the new 209,000-square-foot ambulatory care center. Lovell FHCC fully integrates Department of Defense and Department of Veterans Affairs medical services in the North Chicago and Great Lakes area and combines manpower and resources of the former Naval Health Clinic Great Lakes and the former North Chicago VA Medical Center (VAMC). The unique shared mission of the FHCC means that active duty military, their families, military retirees and veterans are cared for at the facility, which includes three community based outpatient clinics and four clinics on base. Planning began more than a decade before the integration. After integration, the FHCC continued to grow, renovating and opening new clinic spaces and adding services.

July, 2008 Groundbreaking ceremony is held for ambulatory care clinic (Bldg. 133EF) and four-story parking structure

October, 2009 National Defense Authorization Act of 2010 is signed into law, authorizing the VA and DoD to stand up the nation's first federal health care center.

October 1, 2010 Lovell FHCC is officially dedicated at a ribbon-cutting outside the ambulatory care clinic, fully integrating DoD and VA medical services.



September, 2011 Caregiver Support Center Opens

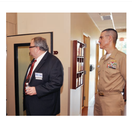
2011 Veterans Treatment Assistance Court program is launched

June, 2012 Community Living Center Ribbon-Cutting

August, 2012 FHCC Holds First Navy Change of Command

October, 2012 Green House Homes Ribbon-Cutting

December, 2012 Navy Master-At-Arms Attends VA Police Academy; FHCC Police Dept. Integrates



August, 2013 Kenosha CBOC Ribbon-Cutting

November, 2013 Walk-In Center for Homeless Veterans Ribbon Cutting

2014 Real-life trauma training partnership between FHCC, Navy Medicine and Stroger Hospital begins

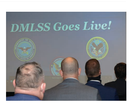
May, 2015 McHenry CBOC Ribbon-Cutting

July 2017 Fisher Clinic Ribbon-Cutting

September, 2017 Hematology/Oncology, Wound Care Clinic Ribbon-Cutting

July, 2019 FHCC and Lake County, Ill., Celebrate "Functional Zero Veteran Homelessness"

October, 2019 Navy Medicine Readiness Training Command Great Lakes stands up at FHCC



August, 2020 FHCC Celebrates Lauhch of Defense Medical Logistics Standard Support (DMLSS)

ONE TEAM Extra
News Employees Can Use

FHCC 2020 LEAD class graduates

Graduates of Lovell FHCC's recent Leadership, Effectiveness, Accountability and Development (LEAD) class persevered through the pandemic and graduated in July.

They brainstormed as a group to figure out how to make up missed classes, said Christine Misovie, the LEAD facilitator, which included dividing the class into smaller groups. Even graduation was a little different than past years; however, FHCC Director Dr. Robert Buckley and Commanding Officer Captain Thomas Nelson were still able to present each graduate a certificate.

"The LEAD program facilitator, trainers and mentors have dedicated so much and have stretched creativity during this time of COVID-19 to ensure student needs are met," said graduate Terri Smith, a social worker. "We thank Dr. Buckley for presenting LEAD graduates with certificates. His presence truly further acknowledged the importance and the usefulness of this program."

The 2020 FHCC LEAD Class held a physically distanced graduation this summer. (Photo by Mass Communication Seaman Apprentice Caylen McCutcheon)

LEAD is the first tier of the VA leadership development program, offered to employees in civilian wage grades 5-11 (or wage-grade equivalent), and equivalent enlisted military ranks (E5 and E6). Prospective students must show the potential to advance to leadership positions with broader responsibility in the organization. In addition to monthly classroom sessions and mentoring sessions, students may attend facility-level committee meetings. LEAD students are paired with experienced staff mentors. They are required to regularly meet with mentors to work on Professional Development Plans.

Misovie said this class learned about Whole Health, Servant Leadership, "and they learned how to be that 'change advocate' person in the organization."

Contact Misovie at 224-610-4539 about the next class, which is temporarily on hold. The other 2020 graduates are Robin Amankwah, Kristine Chynoweth, Blaise Gwellem, Horace Hargrove, Jason M. Jackson, Sr., Walter Lewis, Ma Theresita Ocampo, Andrea Ship, Tamara Summerville, David Sutter, Michelle Terrafino, Andrea Franklin, Meleyna Ulloa and Svetlana Titarenko.

- Jayna Legg

FHCC orthopedic surgeon recognized nationally

FHCC Lt. Cmdr. Andrew Bernhardson, an orthopedic surgeon, never expected the research he started with his team at his previous duty station would result in an award and national accolades.

While in the busy process of reporting to the FHCC in June, he got the news of his paper receiving the honorable Hughston Award from the American Orthopaedic Society for Sports Medicine for 2020. This prestigious achievement was a surprise to Bernhardson and his co-authors.

Bernhardson's research paper titled, "A Prospective Analysis of Patients with Anterior Versus Posterior Shoulder Instability: A Matched Cohort Examination and Surgical Outcome Analysis of 200 Patients," was featured in an issue of the *American Journal of Sports Medicine*. Berhardson describes Jack C. Hughston, the founder of AJSM and namesake for the award, as the "father of sports medicine."

Berhardson decided to research the differences between anterior and posterior shoulder instability with the goal of providing providers and patients a new resource.

Bernhardson hopes to implement an injury prevention program for Navy recruits. This would include providing a Vitamin D supplement since the deficiency is so common. It can cause muscle weakness and other health issues that can lead to injuries. Bernardson's role is to provide care, not only for recruits in training, but for all types of patients who seek care in his FHCC clinic.

"This reflects very highly on LCDR Bernhardson's hard work and dedication to research, Navy Medicine, as well as his status as a national expert in sports medicine," stated Lt. Cmdr. Daniel Griffin, head of Orthopedic Surgery and Bernhardson's supervisor.

- Seaman Apprentice Minh-Thy Chu

FHCC orthopedic surgeon Lt. Cmdr. Andrew Bernhardson is pictured in his office. (Photo by Mass Communication Seaman Apprentice Minh-Thy Chu)

Congratulations!

- Sailors of the Quarter, 3rd Quarter, were named: Senior Sailor is **HM1 Kirk Bishop**; Sailor of the Quarter is **HM2 Salina Rutherford**; Junior Sailor is **HM3 Zackary Sage**; Blue Jacket is **HN Brianel Enriquezrios**.
- **2020 Green Award** went to a PACT team for their Primary Care Electronic Fax System, deveoped in response to the pandemic. Team members were: **Laura Boyle, Tina Cox, Monica Davis, Evelyn Dixon, Dr. Anna Layug, Dr. Ramil Francisco, Ariel Olavere, David Szopinski** and **Dr. Hosam Zakariya**,
- These sailors were selected for promotion to the next pay grade: **HM1 Salina Rutherford, HM1 Kevin Mandal, HM1 Derek Stanway, HM1 Winston Winslett, HM1 Tylus Charles, LS1 Jermal Callender, IT1 Brandon Adams, HM1 Jeremiah Cornelius, HM2 Brian Gomez, HM3 Colten Keeling, HM3 Dylan Conklin, HM3 Simeon Foreman, HM3 Alexis Roberto, LS3 Sebastian Sierra** and **S3 April Stocker**.
- The 2020 Daisy Team Award went to the **Home Telehealth Team**. The May Daisy Award winner was RN **Lt. Mayra Monarrez,** ICCU. The March Daisy winner was **RN Renju Ginson**, 133-4A/B. Patients and co-workers submit nurses for the Daisy Award who model nursing excellence.
- Spirit of Lovell winners during the pandemic are the **Primary Care PACT** team, **Primary Care Respiratory Clinic**, and **ICU/Critical Care**. The Respiratory Clinic team is pictured.

Find More Online
@ facebook.com/LovellFHCC

Captain Lovell encourages all to wear their face masks

FHCC starts pharmacy curbside service for urgent, new prescriptions

- MOVE! cooking demonstrations restart
- Flu shots now available for patients
- Lovell FHCC updates, helpful info,*and many more stories, photos and videos!*

Or Visit Our Website
@ lovell.fhcc.va.gov

ICU preps for COVID-19 with research, training

By Jayna Legg
Lovell FHCC Public Affairs

They could see it coming. They didn't know it at the time, but the Lovell Federal Health Care Center ICU doctors, nurses and other clinicians had about six weeks until they received their first COVID-19 patient.

When the deadly virus arrived, the FHCC ICU team was ready. "We learned a lot about what was happening in China, Italy and South Korea," said Dr. Raúl Gazmuri, section chief of Critical Care and ICU director. "Everybody was issuing guidelines."

Looking back to the challenging spring, Gazmuri said the good news story he tells is one of "successful teamwork, preparation, learning about the disease as we went along, and saving lives."

Between March 1 and July 1, of 82 COVID-19 patients admitted to acute inpatient medicine (without advanced directives that would have limited care), 21 came to the ICU. All recovered but one. The patient who died was extremely ill with other factors, Gazmuri said.

The lifesaving team included many: the ER, anesthesia, cardiology, pharmacy, infectious disease personnel, and especially respiratory therapists.

FHCC Chief Medical Executive Dr. Frank Maldonado agreed that teamwork was key to the ICU's favorable patient outcomes. But perhaps most notably, Maldonado said the ICU team understands how severe illness can affect the body.

"The knowledge of the critical care team regarding body physiology – or how the body works normally, how it responds to severe illness and how does illness affect the body – is critical for having a positive outcome with this disease, that and good bedside care," he said. He added that the ICU team, under normal circumstances, "is very academic. We have a very highly motivated and well-trained and well-read team that works well together."

The FHCC ICU team meets at morning shift change to share information, including latest developments on treatment of COVID-19. (Photo by Jayna Legg)

In addition to the team researching COVID-19 as much as possible, physical steps had to be taken in the ICU. FHCC engineers doubled the number of negative pressure rooms to eight. Negative air pressure rooms are used to isolate patients and prevent spread of airborne diseases.

New protocols were created for a long list of procedures, from when and how best to intubate a COVID-19 patient to how to provide CPR to a patient suspected of having the virus – all while minimizing the risk to staff.

When the team learned about the benefits of "proning," RN Mylene Apigo, clinical nurse leader in the ICU, took the lead to develop a protocol and form a Proning Team. She said the team practiced on manikins, and on themselves when necessary. Proning is the process of turning patients from their backs onto their stomachs so they are lying face down. The position allows better expansion in parts of the lungs, and therefore may help with oxygenation.

Gazmuri and Apigo agreed that, for staff, fear was one of the biggest foes in the beginning. "There were a lot of uncertainties in the beginning and so much information coming from so many places," Apigo said. Staff had to fully understand how Personal Protective Equipment works. "After about two or three weeks, everyone relaxed, and the fear faded away when they realized, 'we know how to provide the care and protect ourselves,'" he said.

The ICU incorporated a "Work of Breathing Scale" into a tool called the Rapid Response System, to recognize early on an increase in how hard a patient works to breathe. Gazmuri explained that as a patient gets sicker, the patient's lungs get stiffer, and then the patient breathes faster, using other muscles.

The scale was developed, and its clinical use was demonstrated at the FHCC, about five years ago. By paying close attention to a patient's breathing, intubation can be avoided in many cases, Gazmuri said.

Gazmuri estimated that 80 percent of the COVID-19 patients admitted to the ICU were not intubated, "and they did well." That fact meant staff could concentrate on the sickest patients and provide care that likely saved their lives, Gazmuri said.

Teamwork was key, in the ICU and with other parts of the hospital. "No decision was made alone ... everyone learned things new to that person," he said. "That knowledge crosses our usual boundaries. Whatever we learn is applicable to our patients."

For the rest of the story, go to: *https://www.lovell.fhcc.va.gov/features/index.asp*

Army veteran 'half dead' recovers from COVID-19 in ICU

By Jayna Legg
Lovell FHCC Public Affairs

After more than two months fighting COVID-19 in the ICU at Lovell Federal Health Care Center, Vietnam veteran Orlando Richardson was weak, but slowly regaining his strength.

The former Army paratrooper had nothing but praise for the ICU team he credits with saving his life. "I've received excellent care," said Richardson, who was still wobbly as he stood with some assistance and sat in a wheelchair in the ICU on an early summer morning. "I was half dead when I got here."

His memory of his first days in the ICU is hazy. He remembers calling a friend to bring him to the FHCC. He couldn't walk at that point he was so sick. Just two days prior, the retired postal carrier went to the store to do some shopping.

"I was in a mask," he remembered. "Someone who wasn't wearing a mask coughed on me … two days later I was so weak I had to crawl to the bathroom."

Richardson, from Chicago, has participated in PTSD support groups and at the FHCC and also goes to the Evanston Vet Center for services. He was afraid to go to the hospital. "I thought, 'If I do get that sick, I'm probably going to die.'"

Richardson required a tracheostomy and was on a ventilator for 40 days. Dr. Raúl Gazmuri, section chief of Critical Care and ICU director, said of the more than 20 COVID-19 cases the ICU had treated to date, Richardson was the toughest patient. "You were so sick," Gazmuri said, addressing Richardson. "You were maxed out with oxygen on the ventilator."

The next step in treatment would have been putting Richardson on an ECMO (extracorporeal membrane oxygenation) machine, Gazmuri said, something FHCC doesn't have. Fortunately, Richardson didn't go on the ECMO and stayed at the FHCC, gradually improving enough to get off the ventilator and remove the tracheostomy.

"They programmed in us as paratroopers something called drive," he said. "If there's an opportunity, I'm going to take it. I'm going to beat it."

Veteran Orlando Richardson poses with a few of the Lovell FHCC ICU staff members he credits with saving his life. (Photo by Jayna Legg)

Richardson was most looking forward to hanging out with his five grandchildren. During his illness, ICU staff helped him video chat with his grandchildren from his hospital bed.

He credited his faith and the ICU team with his recovery. "I would not be here. I believe in God - and the wisdom he bestowed on these scientists," he said, comfortably interacting with a group of smiling ICU clinicians.

Third-year medical resident Dr. Nyembezi Dhliway, part of Richardson's treatment team, told him, "Your life is a miracle."

Instead of a second chance, Richardson said, "I've been given three or four chances." His first "second chance" was surviving 1967-68 inVietnam. "In combat, I could hear bullets whizzing by my head."

He hopes that sharing his recovery experience will inspire "someone," especially veterans.

Richardson was discharged in August and transferred to a rehabilitation facility, where his family reported he was doing well.

The Apollo
The Apollo is the official newsletter of the Captain James A. Lovell Federal Health Care Center. It is designed by the FHCC Communications Department.

For correspondence, write to:
Lovell FHCC Communications Department
3001 Green Bay Rd.
North Chicago, IL 60064
Or, call: 224-610-3714

Factual Accuracy and Disclaimer:
Accuracy is important to us. If you believe an error has been made, email FHCCFeedback@va.gov. Use of social media does not imply endorsement on the part of the Departments of Defense or Veterans Affairs, and may not be available from all government servers. Content on these sites is not edited for accuracy and may not necessarily reflect views of the federal government.