



**VISN 8**  
VA Sunshine Healthcare Network

# Veterans HEALTH MATTERS

WELLNESS MAGAZINE FOR VETERANS IN FLORIDA, SOUTH GEORGIA & THE CARIBBEAN

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TAKE ONE HOME



Inside:  
WHEN THE  
**VETERAN**  
YOU CARE FOR IS  
HOSPITALIZED

# COMING SOON

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## To Our Readers

If you aren't strutting a healthier body thanks to the VA's "Be Active and MOVE!" program, now is your chance. A successful new program at the VA hospital in Tampa uses the latest telehealth technology to motivate and educate people about exercise. On page 3, read about the pilot program and how it's being extended to VA facilities throughout the VA Sunshine Healthcare Network.



VA Caregiver Support is a focus in this issue of **Health Matters**. If you're caring for the Veteran, you'll want to know the proper legal documents to have in place before a medical crisis page 4. Page 5 offers steps on how to be a vital, respected member of your loved one's Health Care Team. All of these preparations build confidence, ease stress, and ensure everything is in place for the very best care of your Veteran.

Page 6 offers great tips on how Veterans can get the best overall care during emergencies that may require immediate treatment outside the VA medical system.

Pay attention to the "Salty Six," page 7, a list of the top foods in today's diet that are loaded with excess sodium, putting you at risk of heart disease and stroke. For a salt-free alternative, try Veteran Terri Eanes' cucumber salad recipe on that same page.

Help spread the word about the VA's new **E-Donate** online option (back cover) that gives community members the opportunity to support a Veteran at a VA hospital quickly, easily and safely.

Finally, this is my final column as I am retiring from the VA after 34 years of federal service. I thank you for your service and your support. It has been my honor and privilege to serve you.

Have a healthy and safe summer.

Nevin M. Weaver, FACHE  
VISN 8 Network Director

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# TELEHEALTH

## Pilot Program Helps Veterans

Once MOVE! Program Coordinator Melody Chavez initiated the “Be Active and MOVE!” pilot program for Veterans at the James A. Haley Veterans Hospital, it didn’t take long for her to see the program’s impact. “Many Veterans are joining in, getting into it, and talking it up. It’s been a great example of how we in VA are making prevention more engaging for Veterans, and using the latest telehealth technology to do it.”

The Tampa-based hospital is one of several VA hospitals nationwide participating in the pilot program to extend the reach of planned physical activity programs for Veterans. Florida VA hospitals in Tampa, St. Petersburg, Gainesville, and Lake City, are involved in the test program using Clinical Video Telehealth (CVT) services to more broadly deliver MOVE! physical activity classes to multiple sites. The concept is simple: Staff members known as Telehealth Clinical Technicians (or TCTs) help physical therapy and recreational therapy experts at the hospital lead a group class that is broadcast to the smaller, community-based outpatient (CBOC) clinics—in this case, three of Haley’s CBOCs.

The Haley MOVE!® team started the first 8-week phase of the pilot program in October 2012. “Our kinesiologist, Bernadine Sanchez, has done a great job leading the weekly, hour-long classes,” says Chavez, a registered dietitian and section chief of Ambulatory Care Nutrition. “Each class typically consisted of 30 minutes of education, followed by 30 minutes of physical activity.”

Attendees learned about things like stretching and the benefits of being active. They were also given pedometers to promote and measure their walking. “Because many Veterans don’t really know where to start when it comes to physical activity, we coached them through the basics,” she notes. “We covered topics like heart rate, proper foot wear, and getting motivated, and by the end of the classes Veterans essentially had a new ‘tool’ to use to stay active and healthy.”



*Bernadine Sanchez, Kinesiologist and David Folds, Health Promotion and Disease Prevention Coordinator, lead this Be Active and MOVE! Fitness class on proper stretching before walking. Virtual fitness classes like this are broadcast from the James A. Haley Veterans’ Hospital in Tampa to VA outpatient clinics close to where Veterans live and receive their primary health care.*

Inspiration is also an important aspect of the classes and another key to the program’s success. “Patients are more likely to do something if a peer recommends it,” Chavez explains. “So we invited local staff and Veterans to talk about their personal stories of weight loss—usually for about 10 minutes at the end of a class.” Chavez’ facility completed the pilot’s first phase and began the second 8-week phase in February. “We’ve had good results in the first phase. Several patients did really well and a few lost in excess of 20 pounds each!”

*- Adapted from a feature by Ted Slowik, VHA National Center for Health Promotion and Disease Prevention*

### What’s Next

Besides Tampa, the pilot’s first phase was also successful at all of the VA hospitals in Florida that participated. Overall, patients lost weight and were happy to have a program that brings exercise classes close to home. Phase II continues throughout 2013 at other VA facilities in the VA Sunshine Healthcare Network of hospitals in Florida, South Georgia, and the Caribbean.

# What to do when the VETERAN you care for is HOSPITALIZED

*If a Veteran's condition requires ongoing or intensive medical treatment, it's likely that you and the Veteran have seen, or will see, the inside of a medical center more than the average person. When hospitalization is necessary, there are things you can do to feel more confident, ease your stress, and be an effective advocate and respected member of the health care team.*



## 1. Have Needed Legal Documents in Place.

**Advance Medical Directives** inform physicians and family members what kind of medical treatment and care a Veteran wishes to receive in the event of their inability to make those decisions. A Living Will and a Do-Not-Resuscitate (DNR) Order are examples of advance medical directives. A Living Will comes into effect during end-of-life situations. It records the specific kind of treatment and care a Veteran wants at that time. A DNR order, which must be written by a physician, gives permission to the medical team not to begin resuscitative efforts if the Veteran's heart stops or he or she stops breathing.

**A Durable Power of Attorney for Health Care**, also known as a health care agent or proxy, is the individual appointed to make decisions about medical care if the Veteran can't. That person may be you. A health care agent can be assigned as part of the advance directive form. Signed copies of these documents should be given to the Veteran's doctor, and incorporated into the patient chart each time the Veteran is hospitalized.

**Be Prepared to Provide Information.** You can be proactive, feel more confident in your dealings with medical center personnel and facilitate the Veteran's transition into the hospital setting by providing the following information immediately upon admission:



The Veteran's medical history. This includes:

- A list of the Veteran's allergies
- A list of current medications and dosages
- A list of names and phone numbers for all physicians and consultants who are caring for the Veteran
- A clear and detailed written description of the Veteran's current physical and mental capabilities

## 2. Be a Part of the Veteran's Health Care Team.

Think of yourself as a member of the Veteran's health care team, which also includes the attending physician, the hospital nurses, and a hospital social worker or case manager. Immediately upon arrival at the medical center:

**Find out the name of the attending physician of record for the Veteran.** This individual is the primary doctor on the case and will coordinate care in the medical center. The attending physician will be in communication with the other consulting physicians and often can summarize the entire treatment plan. Make sure you understand and agree with that plan. Don't hesitate to continue to ask questions until you feel comfortable with the answers.

**Find out the best way to get in touch with the attending physician.** Who will initiate the phone contact? At what number can the physician be reached and what times are best to call? Make sure the "face" sheet in the Veteran's hospital chart contains your name and your correct phone numbers.

**Get to know the nurses who are caring for your loved one.** They can answer your day-to-day questions and are an excellent source of information and support. Don't be afraid to ask the nurses about any new procedures or changes in the Veteran's course of treatment. The change of shifts is a very busy time for nurses, so try to hold your questions until the nurse coming on duty has received his or her report.

### **Speak to a hospital social worker or case manager.**

This individual will help you with discharge planning issues including who will provide home health care, what home health equipment the Veteran might need, and who will be paying for these additional expenses. While it may not be the first thing on your mind, it is very important to start thinking about discharge planning when the Veteran first enters the medical center. It is important that the discharge planner (and the nurses involved) fully understand the Veteran's physical and mental capabilities, so the most appropriate help for you and your loved one can be ordered as part of the discharge plan. Physical and/or occupational therapists can play an important role at this time in providing a professional evaluation of your ability to transfer the Veteran in the home setting during the recovery period and the Veteran's ability to function independently.

**Your role as a Caregiver and advocate.** When a chronically ill or disabled Veteran is hospitalized, the focus of their treatment plan may be palliative (that is, easing the Veteran's discomfort and symptoms with treatment and management) rather than expecting a cure. Your role as a Caregiver and advocate for yourself and the Veteran you care for is especially important at this time. The other members of the health care team should know you are speaking not only as a family member or dear friend, in those additional capacities as well, and you want to feel comfortable, capable, and confident with what is expected of you before the Veteran leaves the medical center.



# Hospitalization:

## Getting Care Inside & Outside VA

Most Veterans receive all of their health care at one VA facility, but sometimes special services require them to be seen at another VA or in the community at a health care center outside VA. The VA's goal is to avoid a delay in a Veteran's care and to protect their health and safety.

If care is not available at a Veteran's assigned VA facility, a formal referral will be made for transfer to another VA hospital. This referral allows everyone to be informed about the arrangements for safe transfer to that facility.

A transfer may also be arranged when a VA facility is full or is unable to provide services to a Veteran in a timely manner. In this case, the hospital works with another VA or community facility to arrange transfer and assume financial responsibility for the care. If a Veteran declines the arranged transfer and instead decides to stay at a community hospital of his or her choice, **that individual is responsible for all costs** including transportation, from the time the transfer was declined.

### What if I am taken to a non-VA emergency room by ambulance even after I told them I am a Veteran?

In case of an emergency, Veterans should go to the nearest hospital that can treat and stabilize their condition. If transported to a community facility by ambulance, it's important that you (or your caregiver) immediately inform the Emergency Room staff of your Veteran status and request to be transferred to the closest VA.

Community emergency rooms are required to inform the nearest VA facility within 72 hours of a Veteran's admission. Likewise, Veterans need to contact their assigned VA within the same timeframe and let them know they've been admitted to a non-VA facility. The VA will then attempt to arrange for safe transfer to a VA facility that is able to provide the care.

VA payment for an ER visit is based on a case by case review. The VA does not cover deductibles, copayments and cost shares for private insurance.

Veterans who have questions about their care coordination should contact a member of their Patient Aligned Care Team (PACT) at their assigned VA facility.



# Making Sense of Sodium

Eating foods that contain large amounts of salt can create all sorts of health problems, including high blood pressure. Did you know that a lot of common foods are packed with excess sodium (salt)? And not all foods with high salt content taste salty. It's not just the french fries and potato chips you need to be careful with.

That's why the American Heart Association/American Stroke Association is increasing awareness of sodium and the "Salty Six" – common foods that may be loaded with excess sodium that can increase your risk for heart disease and stroke. The AHA's Heart-Check mark – whether in the grocery store or restaurant – helps shoppers see through the clutter on grocery store shelves to find foods that help you build a heart-healthy diet. Make the effort to choose products that contain less sodium. It's worth it!

Here is a quick look at the Salty Six, the top sources of sodium in today's diet. For more information and tips on how to reduce the sodium in your diet, go to [www.heart.org](http://www.heart.org) and enter "salty six" as a search term.



## DID YOU KNOW?

**THESE SIX POPULAR FOODS CAN ADD HIGH LEVELS OF SODIUM TO YOUR DIET!**  
The American Heart Association recommends that you aim to eat less than 1,500 mg of sodium per day.

When you see the Heart-Check mark on a product, you know the food has been certified to meet nutritional criteria for heart-healthy foods, including sodium.



**BREADS & ROLLS**

Some foods that you eat several times a day, such as bread, add up to a lot of sodium even though each serving may not seem high in sodium. Check the labels to find lower-sodium varieties.

1



**COLD CUTS & CURED MEATS**

One 2 oz. serving, or 6 thin slices, of deli meat can contain as much as half of your daily recommended dietary sodium. Look for lower-sodium varieties of your favorite lunch meats.

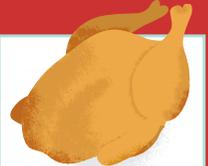
2



**PIZZA**

A slice of pizza with several toppings can contain more than half of your daily recommended dietary sodium. Limit the cheese and add more veggies to your next slice.

3



**POULTRY**

Sodium levels in poultry can vary based on preparation methods. You will find a wide range of sodium in poultry products, so it is important to choose wisely.

4



**SOUP**

Sodium in one cup of canned soup can range from 100 to as much as 940 milligrams—more than half of your daily recommended intake. Check the labels to find lower sodium varieties.

5



**SANDWICHES**

A sandwich or burger from a fast food restaurant can contain more than 100 percent of your daily suggested dietary sodium. Try half a sandwich with a side salad instead.

6

\*Centers for Disease Control and Prevention, Morbidity and Mortality Weekly Report (MMWR), Vital Signs: Food Categories Contributing the Most to Sodium Consumption—United States, 2007–2008, February 10, 2012 / 61(05):92–98.

## Cucumber Salad

### Ingredients

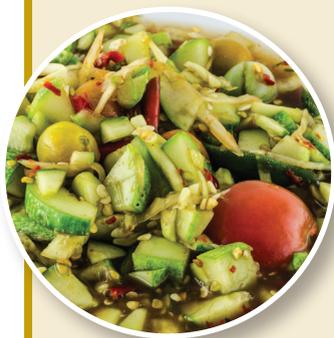
- 1 Tbsp rice wine
- 1 tsp olive oil
- 1/2 tsp sesame oil
- Dash cayenne pepper
- 1/2 tsp low-sodium soy sauce
- 2 cucumbers, cut into 1/4 inch slices
- 1 tsp sesame seeds
- 2 tsp chives, finely diced

### Directions

Mix vinegar, olive oil, sesame oil, soy sauce and cayenne pepper in a medium bowl. Add cucumbers, chives and sesame seeds and mix well.

### Nutritional Information

Serves 4 | Serving size is 1/2 cup  
Calories 45 | Fat 2 g | Sodium 15 mg |  
Carbs 5g | Fiber 2g | Protein 2g



*Recipe by  
Terri Eanes,  
Veteran,  
U.S. Marine  
Corps &  
U.S. Navy*



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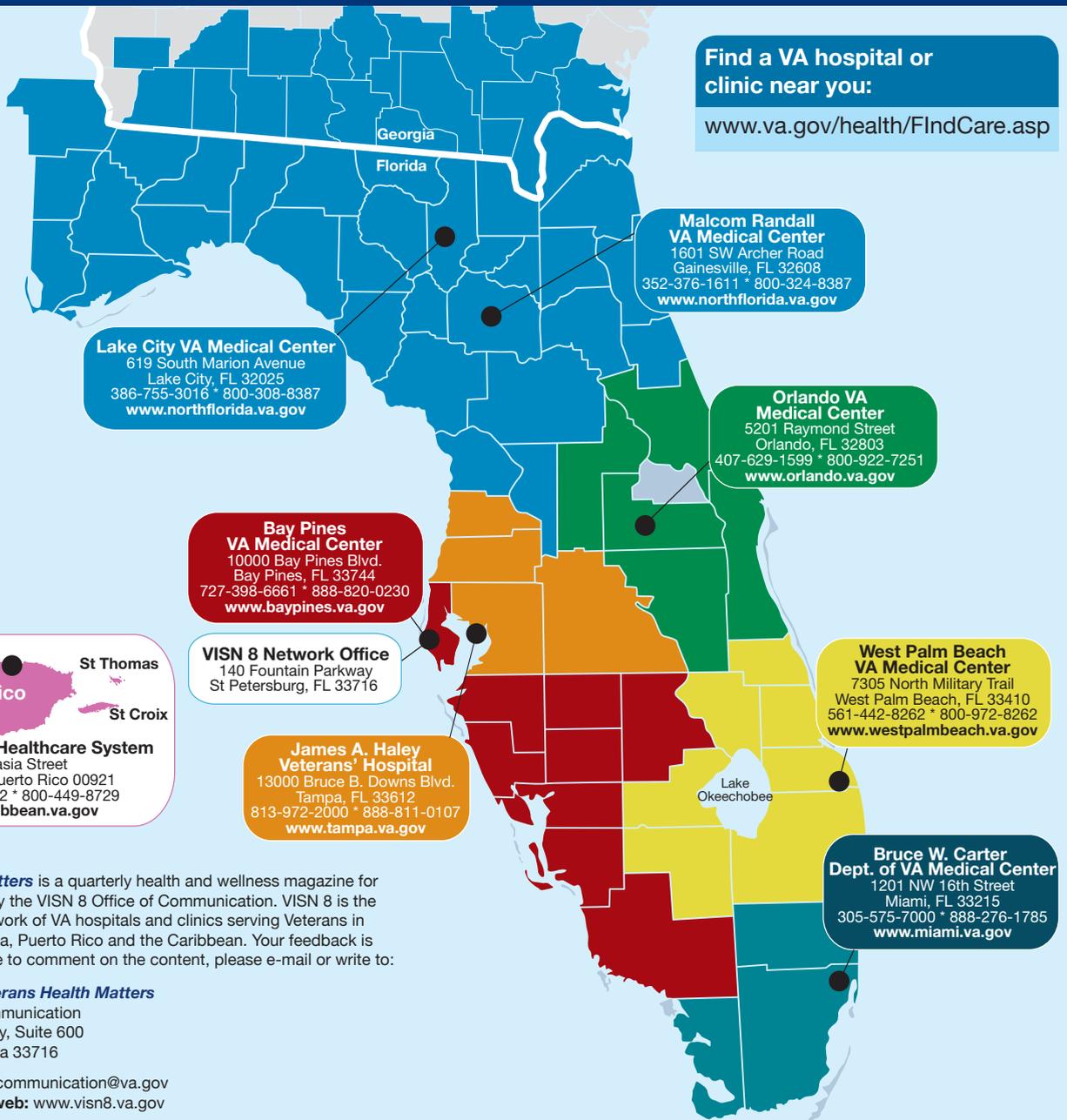
E-Donate is a new online donation option at [www.pay.gov](http://www.pay.gov). It gives community members who wish to give back to Veterans at a VA medical center a simple, safe way to pledge their support to the account of their choice. To learn more about E-Donate visit [www.volunteer.va.gov/apps/VOLUNTEERNOW/](http://www.volunteer.va.gov/apps/VOLUNTEERNOW/)

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at all  
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**Veterans Health Matters** is a quarterly health and wellness magazine for Veterans produced by the VISN 8 Office of Communication. VISN 8 is the country's largest network of VA hospitals and clinics serving Veterans in Florida, South Georgia, Puerto Rico and the Caribbean. Your feedback is welcome. If you'd like to comment on the content, please e-mail or write to:

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