



Pulmonary program helps Veterans breathe easier

Story and photo by Kimberly Gearhart

Nine months ago, William Pfaff needed oxygen to get through his day. Just climbing a flight of stairs left him out of breath.

“Now, I park on the 7th floor and take the stairs up to the clinic on the 9th or 10th floor,” Pfaff said, stepping onto an elliptical trainer in the New Orleans 9G rehabilitation facility.



William Pfaff, left, uses an elliptical trainer as part of his Pulmonary Rehabilitation workout with Patricia Jefferson.

Pfaff, an Army Veteran who served between 1966 and 1968, participates in Pulmonary Rehabilitation (PR), a Southeast Louisiana Veterans Health Care System (SLVHCS) program unique in this region.

“I come twice a week and work on getting stronger and breathing better,” Pfaff said.

“There aren’t many programs like this anywhere in VA,” said Nathan Dion, registered respiratory therapist and SLVHCS’ Pulmonary supervisor.

A 36-week multi-disciplinary program, PR is designed to improve the endurance, lung capacity and general quality of life for patients suffering from chronic pulmonary diseases.

Patients with decreased breathing function can be referred for evaluation by their primary care provider.

“Although our efforts are often focused on patients with Chronic Obstructive Pulmonary Disease (COPD), patients with asthma, reduced lung volume or cancer can benefit,” Dion said.

As part of his rehabilitation, Pfaff works with registered Respiratory Therapist Patricia Jefferson, who teaches him controlled breathing

techniques and monitors his heart rate and oxygen levels during exercise periods.

“We work on getting him the skills he needs to manage his respiratory health even after he leaves the program,” Jefferson said.

That focus on wellness and health self-management is critical to improving quality of life for Veterans as well as reducing health care expenditures, Dion noted.

Dollar-for-dollar, it is more cost-effective to keep patients healthy than to try to make them better once they have fallen ill.

PR currently shares facilities with the physical rehabilitation program, but will have an expansive, dedicated space when the new Medical Center opens.

“It will be great to be able to get more Veterans into the program and have more space for equipment,” Dion said.

“We really need this,” said Pfaff. “I’ve lost 32 pounds, and I can breathe again. It really makes you want to get up in the morning. Veterans need this kind of positive program.”

If you believe you may benefit from PR, speak to your doctor during your next visit.

Diabetes education groups help Veterans manage wellness

Story and photos by Kimberly Gearhart

According to a 2008 study conducted by the national Centers for Disease Control, approximately 8 percent of the U.S. population suffers from diabetes, and many do not even know it. In Louisiana, that number jumps to 10 percent.

Diabetes is a group of diseases which cause abnormally high levels of glucose, or sugar, to build up in the blood, which can lead to life-threatening complications like high

blood pressure, heart disease and kidney failure.

Luckily, diabetes is a medical condition that can be managed by a combination of drug therapy, exercise and nutrition. The Department of Veterans Affairs has taken a big interest in helping manage Veterans’ diabetes, and has set national goals for improving diabetes management.

“We’re very proud that we have far exceeded the VA goal of reducing Hemoglobin A1C (HgA1C), a marker for diabetes control and management,” said Clinical Nutrition Manager Charlotte Pursell.

The national goal was to see a one percent reduction in Veterans with high HgA1C test readings. Southeast Louisiana Veterans Health Care System (SLVHCS) has doubled that reduction.

That success is due to an interdisciplinary effort to track, alert and educate diabetic patients about their illness and how to manage it. A large part of that effort comes in the form of Diabetes Self-Management Education (DSME) groups

held in New Orleans and Baton Rouge.

“This is a two-hour group discussion for patients who are newly-diagnosed and for those who have had diabetes for some time, but need a refresher,” said Certified Diabetes Educator Aggie Domino Broussard, who coordinates diabetes education in Baton Rouge.

“The goal is to educate patients and families on the basics of diabetes management and to help them work diabetes care into their daily lives,” she added.

Most outpatient clinics in SLVHCS have a registered dietitian on staff who can offer one-on-one medical nutrition counseling to Veteran patients suffering from diabetes.

For many Veterans, the DSME is their first encounter with a dietitian and they have misconceptions about dietitians being the “food police” to tell them what they can or cannot eat, Pursell said.

“I try to convert the negative



Veterans like Harold Kelt Jr. may attend DSME classes in New Orleans or Baton Rouge to learn more about diabetes management.

associations with ‘dieting’ into positive thoughts about ‘doable’ behavior changes. By empowering our Veterans to take care of their diabetes, we can prevent or slow the progression and improve Veterans’ quality of life,” Broussard said.

DSME groups are held 9:30 – 11:30 a.m. Mondays and 1 – 3 p.m. Tuesdays in New Orleans, and 9 – 11 a.m. Fridays in Baton Rouge. Patients wishing to attend do not need a referral from their physician.



LaDonna Yankowsky conducts weekly DSME classes in Baton Rouge.



Protect yourself from flu with hand washing, shot

Story and photo by Kimberly Gearhart

Influenza (flu) is a respiratory illness caused by a variety of viruses. Flu occurs each year and spreads easily from one person to another.

“Getting a flu shot goes a long way toward protecting yourself and your family,” said Julie Catellier, Southeast Louisiana Veterans Health Care System (SLVHCS) director. “Flu is no joke. Thousands of people die from flu every year.”

According to the Centers for Disease Control and Prevention (CDC), on average, 226,000 people are hospitalized and 36,000 people die from seasonal flu complications annually in the United States.

Last year, two flu shots were recommended, due to an outbreak of the H1N1 flu. This year, one shot protects against both seasonal and H1N1 flu. The CDC recommends that everyone six months or older be vaccinated.

Flu shots are especially important for people at high risk, including pregnant women, young children, people with chronic health conditions and people 65 years and older.

The injectable vaccine is safe for women who are pregnant and those who are nursing. The nasal vaccine is not recommended for women in any stage of pregnancy.

Vaccinations are critical for health care workers and those who care for loved ones at high risk.

“We encourage all our employees to get vaccinated. We have a duty not to expose our patients to our own illnesses,” said Jan LeMaire, Quality and Performance manager for SLVHCS.

Frequent hand washing helps slow or stop the spread of many viruses, including those which cause flu.

“You should also be sure to cover your cough or sneeze with a tissue and use an alcohol-based hand sanitizer,” said Debbie Vicknair, SLVHCS’ Infection Control manager.

“Flu is miserable,” Catellier said, noting that flu is much easier to prevent than to treat.

Veterans may receive flu shots during regular visits to any clinic location. Walk-in hours are also available, with most locations seeing unscheduled patients between 8 and 11 a.m. and 1 and 3 p.m.



Nurse Practitioner Cynthia Berfect prepares to administer a flu vaccination to VA employee Amanda Jones.

VA improving access to health and benefits information

WASHINGTON – The Department of Veterans Affairs is launching a multi-year initiative called Veterans Relationship Management (VRM) that will greatly improve Veterans’ access to health care and benefits information.

“VRM will transform Veterans’ interactions with VA by using innovative 21st century technologies,” said VA Secretary Eric K. Shinseki.

“Veterans will have a better experience when they contact VA for assistance, and our employees will be able to quickly convey accurate,

up-to-date information through call centers and the Internet.”

Ultimately, Veterans will find enhanced self-service capabilities, and VA employees will have the best tools to serve Veterans, their families and survivors better.

By the end of 2010, VRM will deliver improved telephone services to enable Veterans to reach a call center agent faster.

Recording and review of calls will ensure the quality of services provided to Veterans. To help guarantee success, VRM enhancements

will be rolled out in six-month increments.

An important component of VRM is the Internet site, which puts the Veteran in the driver’s seat for information.

VA collaborated with the Department of Defense to provide a single sign-on capability for both service members and Veterans. Single sign-on will quickly establish an individual’s identity and allow that person to complete transactions without having to re-enter any information.

Self-service access through the (www.ebenefits.va.gov) Internet site is already available in some benefit areas, including military personnel records, VA home loan eligibility certificates, and status information on compensation and pension claims.

VRM is just one of the many initiatives VA is launching to help Veterans get timely access to health care and benefits.

For additional information, go to www.va.gov or call VA’s toll free benefits number at 1-800-827-1000.

Patient-Aligned Care Teams offer Veterans health partnership

Story by Kimberly Gearhart

Patient care as we know it is about to change for the better.

Southeast Louisiana Veterans Health Care System (SLVHCS) is joining a growing number of VA medical facilities in adopting a new method of health care delivery that is patient-centered and focuses heavily on quick and easy communication between patients and their health care providers.



With the PACT model, each patient will be assigned to a team of medical and administrative professionals who will work with the patient to manage his or her health care needs.

Doctors, nurses and other health care and administrative professionals will form Patient-Aligned Care Teams, or PACTs, which will each care for a group of Veteran patients.

“Patients will have a dedicated team of individuals, a PACT, to help manage and monitor their health care needs,” said Janie McKenzie, associate chief for clinical operations at SLVHCS. “This will really place the patient’s needs first.”

If a patient has a question about symptoms or wants to make an appointment, they know just who to call: their PACT members.

“I really appreciate being able to call my doctor’s office, knowing that the same person will answer the phone. Even when she’s not available I know someone will be calling me back soon to respond to my concerns. PACT will do the same for our Veterans,” said Marcy Gautreau, administrative officer for the Baton Rouge Community Based Outpatient Clinic (CBOC).

In addition to improving communication between Veterans and their providers, PACTs are also designed to make getting access to

specialty care easier on the Veteran. When such care is needed, the PACT will work with the Veteran to schedule a convenient time for the appointment, and then follow up with the Veteran and specialty provider to ensure continuous, effective, appropriate health care.

“PACTs will be able to handle many routine questions – about forms or symptoms, for example – over the phone or through secure e-mail messages.

“This means more access to care and more availability for same day or next day appointments for those who really need to come in and be seen,” said Phaedra Pea, patient advocate and My HealthVet coordinator.

At their heart, PACTs offer patient-centered, focused care in an environment that encourages Veterans to take an active, meaningful role in their health care planning, McKenzie said.

“Veterans are the reason we’re here. Providing excellent care for our Vets should be front and center in our minds and hearts,” Gautreau added.

PACTs have begun forming at the Baton Rouge CBOC, and the St. John CBOC will soon follow. Plans are in place to expand to all SLVHCS CBOCs by late 2011.

For more information about PACTs, speak with your primary care provider, patient advocate or local VA clinic manager.