



Global Health Engagements: US Army Regional Health Command-Pacific's Role in the Indo-Pacific Region

Mr. Brad Cogswell, MPA, MPH
Global Health Engagements

brad.j.cogswell.civ@mail.mil
(808) 352-5197
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Disclaimer



The views expressed in this briefing are those of the presenter and do not reflect the official policy or position of the US Army Medical Department, Department of the Army, DoD, or the US Government.



Purpose and Outline



Purpose: To present an overview of the U.S. Army Regional Health Command – Pacific (RHC-P) and our Global Health Engagement Efforts in support of the US Army Medical Command, US Army Pacific Command, and US Pacific Command Strategic Objectives.

Outline:

1. RHC-P Leadership
2. Who We Are & Who We Support
3. Existing Strategic GHE Guidance & Approach
4. RHC-P GHE Strategy Development
 - A. Health Lines of Effort
 - B. Functional Areas
5. Historical GHE Context
6. Current GHE Efforts
7. Ongoing Initiatives



Who We Are



US INDO-PACOM

MISSION: With allies and partners, U.S. Indo-Pacific Command is committed to enhancing stability in the Asia-Pacific region by promoting security cooperation, encouraging peaceful development, responding to contingencies, deterring aggression, and, when necessary, fighting to win.

VISION: A joint combatant command directing, integrating, and employing ready, credible military capability in peace, crisis or war to advance U.S. interests as an active partner in pursuit of a secure prosperous and democratic Asia-Pacific community.

PRIORITIES:

Warfighting Readiness
Regional Engagement
Force Presence and Posture
Quality of Life

USARPAC

MISSION: USARPAC postures and prepares Army forces, sustains and protects those forces in theater, supports the development of an integrated Joint force across domains, and builds military relationships that develop partner defense capacity IOT contribute to a stable and secure Pacific Command area of responsibility.

VISION: One Team – America's Theater Army in the Indo-Asia-Pacific enabling the Joint Force to assure security, stability, and strategic options. A Ready, Responsive Team!

PRIORITIES:

Readiness
Responsiveness in the Pacific
Taking Care of Soldiers, Civilians and Families

US INDO-PACOM



ADM DAVIDSON

US ARMY



GEN MILLEY

USARPAC



GEN BROWN

USAMEDCOM



LTG WEST

RHC-P



BG LEMASTER

MEDCOM

MISSION: Army Medicine provides sustained health services in support of the Total Force to enable readiness and conserve the fighting strength while caring for our Families, civilians and Soldiers for Life.

VISION: Army Medicine is the Nation's premier expeditionary and globally integrated medical force ready to meet the ever-changing challenges of today and tomorrow

PRIORITIES:

Readiness & Health
Healthcare Delivery
Force Development
Take Care of Ourselves, Soldiers for Life, DAC & Families

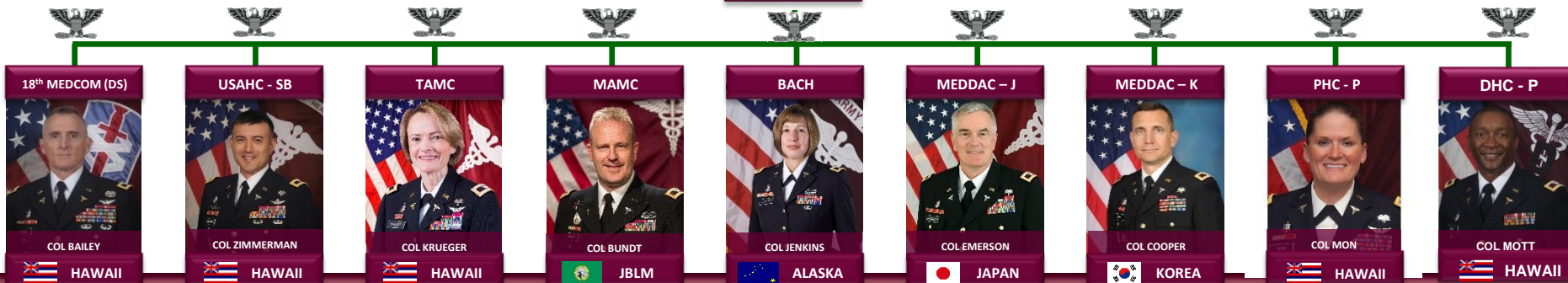
RHC-P

MISSION: To provide Combatant Commanders with medically ready forces and ready medical forces conducting health service support in all phases of military operations.

VISION: To be the premiere health force that is the best-trained and equipped to support the Nation's call.

PRIORITIES:

Enable Readiness and Health
Healthcare Delivery
Develop Organizations, Leaders, and Soldiers





Who We Support



RHC-P serves as the single US Army medical mission command authority and represents the Army Health System in the Indo-Pacific Command Area of Responsibility.



KOREA
Eighth Army
2d ID
19th ESC



JAPAN
US Army Japan
I Corps (FWD)(Deployable HQ)



Public Health
Command - Pacific

HAWAII
US Army Pacific



25th ID(Deployable HQ)
8th TSC
311th SC
94th AAMDC
9th MSC



Bassett Army
Community Hospital

ALASKA
US Army Alaska



Joint Base Lewis-McChord
I Corps(Deployable HQ)
7th ID
593 ESC



Tripler Army
Medical Center



18th MEDCOM(DS)



US Army Health Clinic
Schofield Barracks

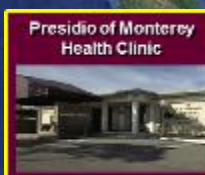


Dental Health
Command - Pacific

Mountain View, CA
351st CACOM



Madigan Army
Medical Center

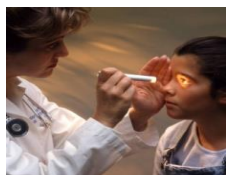


Presidio of Monterey
Health Clinic





A Typical Day in RHC-P



Outpatient Care
13,930 Clinic visits



16 Births



10,664 Laboratory Procedures



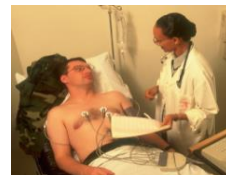
**9,045 Outpatient Pharmacy
Prescriptions Filled**



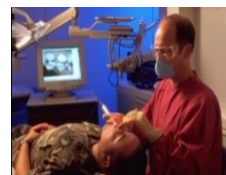
2,414 Immunizations



Veterinary Services
180 Veterinary Outpatient Visits
\$3.65 Million of Food Inspected
462 Food Safety Visits



Inpatient Care
284 Beds Occupied
73 Patients Admitted



Dental
1,254 Procedures



1,477 Radiology Procedures



Personnel Deploying

82 Soldiers and Civilians
(Includes all global engagements: Kuwait, Afghanistan, Africa, Germany, Pacific, others)

Total Enrolled Beneficiary Population
229,137

National Security Strategy :

- Increase **Global Health Security**
- Advance our Rebalance to Asia and the Pacific
- End extreme poverty
- **Lead international coalitions** to confront acute challenges posed by disease
- Protect our citizens and interests, preserve regional stability, and render **humanitarian assistance** and **disaster relief**
- Enhance **pandemic preparedness**
- Lead with capable partners
- Lead in science, technology, and innovation

National Military Strategy

- Deter, deny, and defeat state adversaries
- **Conduct military engagement and security cooperation**
- **Strengthen our global network of allies and partners**
- Advance Globally Integrated Operations
- Produce creative, adaptive leaders
- **Conduct humanitarian assistance and disaster response**
- Developing flexible, interoperable capabilities

Joint Publication 3-0, Joint Operations

*"Ideally, **security cooperation activities lessen the causes of a potential crisis** before a situation deteriorates and requires coercive US military intervention."*

AMEDD 2020 Campaign Plan

- Army Medicine recognized as a national and international health leader to advance Army values, interests and objectives
- **Enhance Diplomacy**
- Shape the Narrative
- Build and Prepare the Team
- **Develop and Strengthen Partnerships**

DoDI 2000.30 Global Health Engagements (GHE) Activities (2017)

- GHE is conducted in support of NSS & NMS
- Improve relationships & interoperability with partner nations to achieve security cooperation
- **Develop & improve human and animal health capabilities & capacities of DoD and partner nation to enhance readiness, stability & security**

DoDI 5132.14 Assessment, Monitoring & Evaluation Policy for the Security Cooperation (SC) Enterprise (2017)

- Foster accurate and transparent reporting to key stakeholders on outcomes and sustainability of SC and track, understand, and improve returns on DoD SC investments



RHC-P GHE Approach



MEANS

WAYS (Mil-Mil and Mil-Civ)

ENDS

Health Lines of Effort



RHC-P (P) ICW Service Components, ARNG, and Interagency

Health
System
Support

Health
Service
Support

Force
Health
Protection

Shape: Build Partner Capacity, Subject Matter Expert Exchanges (SMEE), Int'l Military Ed & Trng

Posture: Humanitarian Assistance and Disaster Preparedness activity sets

Ready: Exercises (e.g. Pacific Pathways & Pacific Partnership) and Operations

Communicate: Sustained Senior Leader Engagements, SMEEs, and Conferences

INDOPACOM Campaign Plan



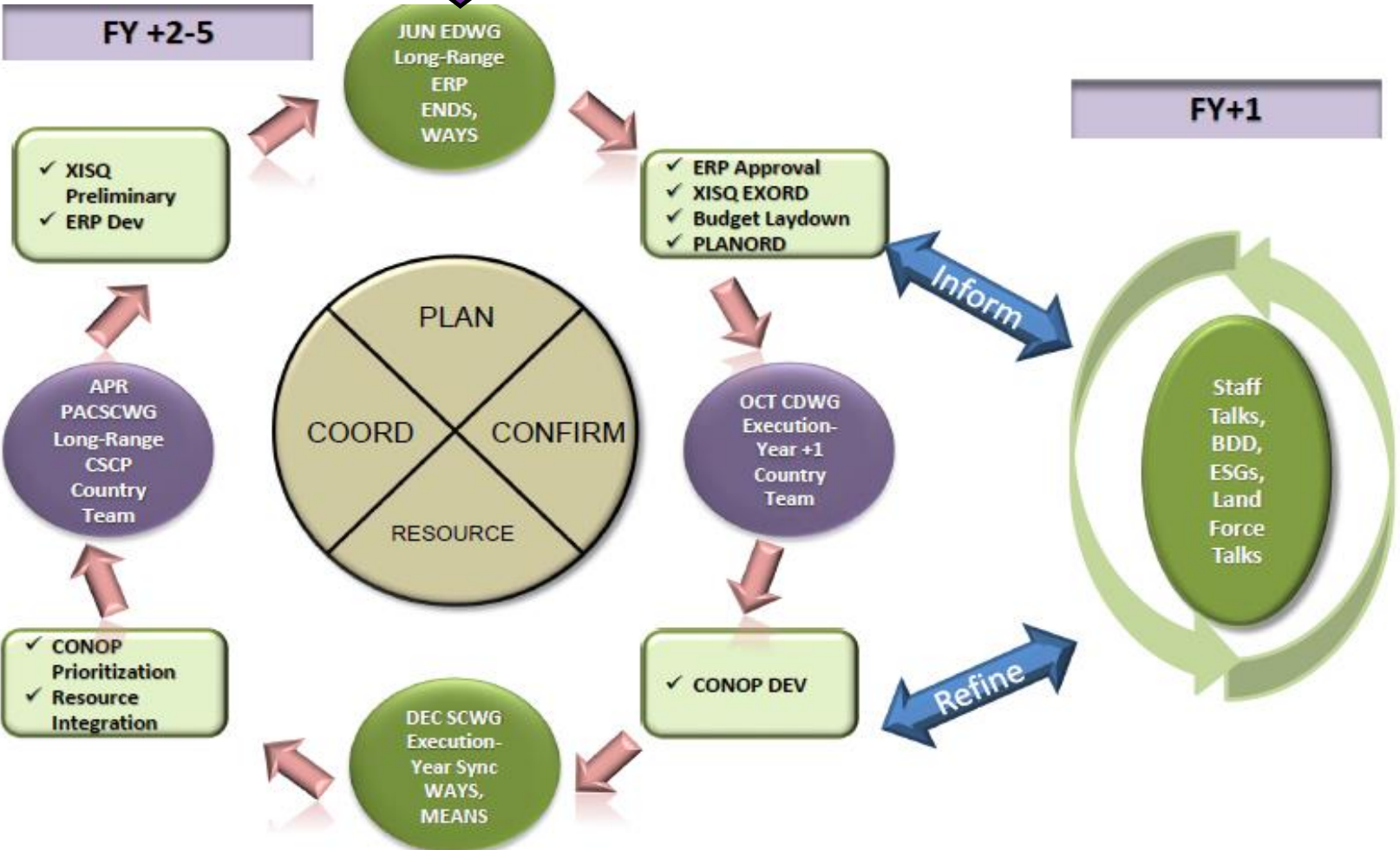
USARPAC Plans (TCSP & TSCP)



Army Medicine Campaign Plan



↓ Engagement Development Working Group (EDWG) -JUNE



LOE & Functional Areas

1. Army Health System Support

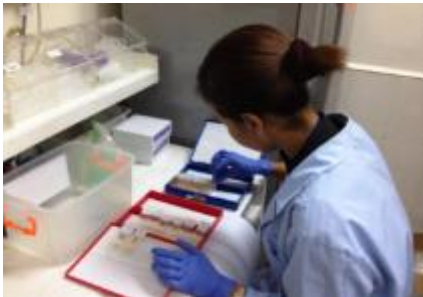
Mission Command	18 th MEDCOM
Medical Intelligence	18 th MEDCOM
Combined Information Data	18 th MEDCOM
Medical Support to PKO*	18 th MEDCOM

2. Health Service Support

Medical Treatment	TAMC
Hospitalization	TAMC
Dental Services	DENCOM
Behavioral Health	RHC-P
Clinical Laboratory Services	TAMC
Medical Evacuation	18 th MEDCOM
Medical Logistics	TAMC
Humanitarian Mine Action*	18 th MEDCOM
Maternal/Child Health*	TAMC

3. Force Health Protection

Preventive Medicine	PHC-P (ICW AFRIMS and NEPMU-6)
Veterinary Services	PHC-P
Combat and Operational Stress Control	RHC-P
Laboratory Services (Area Medical Lab)	PHC-P (ICW AFRIMS and NEPMU-6)
Emerging ID/Tropical Medicine*	PHC-P (ICW AFRIMS and NEPMU-6)



*Indicates USPACOM HLOE



RHC-P Functional Area Playbooks



- Health System Support (Operational Medicine)
 - [Medical Support to PKO](#)
 - Basic First Responder
 - Medical First Responder
 - UN Level 1 Clinic
 - UN Level 2 Deployable Hospital
 - UN Level 3 Deployable Hospital
 - UN Level 4 Fixed Facility
- Health Service Support
 - [Behavioral Health](#)
 - [Clinical Laboratory Services](#)
 - [Dental](#)
 - [Logistics](#)
 - [Nutrition Care](#)
 - [PAD](#)
 - [Pharmacy](#)
 - [Physical Therapy](#)
 - [Radiology](#)
- Force Health Protection
 - [Preventive Medicine](#)
 - [Veterinary Services](#)



Global Health Engagement

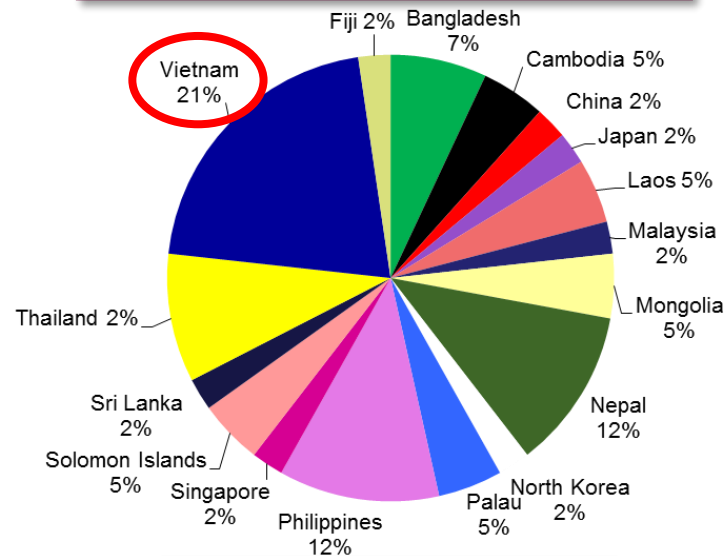
Mid 2015 - 2018

- **Total missions: 173**
- **Total mission types: 12**
- **Total personnel deployed: 362**
- **Total units: 7 of 7 plus HQ Staff**
- **Total number of countries engaged: 22**

Strategic Enabler

- **Bangladesh (Clinical Laboratory/ Biopreparedness/ PKO):** Increasing interagency efforts as well as supporting Global Health Security Agenda & PKO
- **Nepal (FHP/ Behavioral Health/ Disaster Response):** Strengthening USARPAC regional partners
- **Vietnam (Level 2 UN Hospital):** Exporting security and equipment sets

FY18 Engagements (as of JUL)



Ongoing Activities

- **Refining 5 year engagement strategies**
- **Integrating GHE with key exercises**
- **Expanding engagement assessment, monitoring and evaluation efforts**
- **Developing standard engagement packages**



RHC-P GHE Ongoing Efforts –Quad Chart



1 – Program Components

- USINDOPACOM/USARPAC Security Cooperation process/cycle
 - Developing/conducting GHE projects based on US Country Team/Partner Nation demand signals
- Senior Leader Engagements/Land Force Talks Participation
- GHE Program Management – 5-yr GHE Country Strat plans, Internal capacity building, process improvement via USU-CGHE AME model, Database Mgt, GHE stakeholder coordination
- Palau Health Services requirements

3 – Highlights (Past 6 Months)

- Facilitated six-week Japanese Ground Self Defense Force Medical Observer/Training visit (Feb/Mar)
- Conducted joint/combined Nepal Behavioral Health SMEE (17-20 Apr)
- Completed 1st US-Nepal Land Forces Talks in Kathmandu, Nepal (6- 8 Jun)
- Conducted multi-lat Clin Lab/Biopreparedness SMEE in Bangladesh (5-8 Aug)
- Participated in Biosecurity Workshop/TTX in Australia (16-17 Aug)

2 – Issues/Challenges

- No established MEDCOM GHE policy nor doctrine to implement AMEDDCP IP#2 (Improving joint and global health partnerships and engagements)
 - Limited prsnl authorizations to enable GHE
 - No trng curriculum to prepare personnel
 - No dedicated GHE funding to execute
- Adapting to RHC-P organizational structure changes and Battle Rhythm

4 –Key Events (Next 90 Days)

- Complete Palau Health Engagements (Sep/Dec)
- Participate in APMHE in China (17-21 Sep)
- Publish RHC-P FY19 GHE OPORD (NLT 28 Sep)
- Conduct USARPAC Country Synch Mtg (3 Oct)
- Participate in USINDOPACOM Capabilities Development Working Group (29 Oct-2 Nov)
- Attend Association of Military Surgeons of the United States Mtg (26-30 Nov)
- Review/update RHC-P CSP GHE Annex



Palau ENT/Speech Pathology 4-22 Sep 18
Behavioral Health 4-14 Sep 18
Dental 20-29 Sep 18
Urology/OBGYN 3-14 Dec 18

<https://www.usuhs.edu/cghe>





Ongoing Initiatives



1. **Determine VA gap.** Work with Ministers of Health from the 3 compact island nations to determine unmet needs. This would inform RHC-P requirements to close gap on a reimbursable basis. (USARPAC ACoS Med and MoHs).
2. **Determine current MoH Palau expenditures** to fund specialty clinics per year. Could inform what VA would be required to pay to do the same (USARPAC ACoS Med ICW RHC-P).
3. Determine current Pacific Island Health Care expenditures and opportunities for veterans in the Compact nations to fill the gap through the referral system (TAMC).
4. **Explore VA funding DoD.**
5. Leverage existing asynchronous (store & forward) telehealth.
6. **University of Hawaii and USARPAC collaboration.** Await results of grant proposal to see where RHC-P can deploy teams to the three compact island nations to support HN and VA health requirements.
7. **Civil Affairs Team (CAT).** Explore with CAT and VA what capabilities could be leveraged to either upgrade or build modest VA clinic space in each of the National Hospitals to provide at least primary level of care to the veteran population. (USARPAC ACoS Med and MoH).



RHC-P GHE Story Boards



Bangladesh Clinical Laboratory and Biopreparedness Subject Matter Expert Exchange #1



Purpose:

Regional Health Command-Pacific and the Bangladesh Armed Forces (BAF) conducted a mil-mil-civ SMEE in Dhaka, Bangladesh from 7-10 AUG 2017 IOT exchange global health security and bio-preparedness expertise.

End State:

1. Ensure a strong and well-functioning One Health platform in Bangladesh to fully prepare for and respond to potential health threats.
2. Increase security cooperation by building professional relationships and interoperability.
3. Support USAID and CDC health lines of effort.

Summary:

LTC Matthew Levine (AMEDDC&S HRCOE) and MAJ Matthew Wegner (AFRIMS) from the U.S. Army Veterinary Corps (VC) participated in a Joint, Interagency, and Multinational Subject Matter Expert Exchange (SMEE). Field officers from the Remount Veterinary & Farm Corps (RVFC) and the VC discussed the One Health approach, disease surveillance, the Global Health Security Agenda (GHS), and food protection principles.



COL(P) Abdul Hannan (center), Corps Chief, Remount Veterinary and Farm Corps (RVFC), meets with LTC Levine and MAJ Wegner.



MAJ Wegner at the Armed Forces Institute of Pathology, Bangladesh



LTC Levine tours the Combined Military Hospital on Dhaka Cantonment

Supported USA MEDCOM LOEs:

- Readiness and Health (Decisive Operation)
IP1 Optimize Soldier Protection in All Environments
- Force Development (Shaping Operation)
IP2 Improve Joint and Global Health Partnerships & Engagements
IP3 Improve Operational Professional Readiness



Bangladesh Clinical Laboratory and Biopreparedness Subject Matter Expert Exchange #2



Presenters and session moderator from three different countries on the topic of the Role of the Medical Corps in UN Peacekeeping Operations



Participants represented Medical services from the Army, Air Force, Navy, to include the Institute of Epidemiology, Disease Control and Research.

Breakout groups were used to facilitate dialogue and consensus between participants on each key subject discussed.



Female professionals and doctors were represented at all levels of the health spectrum.

Event

- A nine-person team from RHC-P, MAMC and AFRIMS traveled to Dhaka to conduct the second Subject Matter Expert Exchange on Clinical Laboratory and Biopreparedness topics between 5 – 8 AUGUST 2018 in order to share “best practices,” support GHSA objectives and improve current capabilities
- In addition to the US military involvement there were 2 Nepalese military, 25 Bangladesh military, the US CDC country director, USAID members and members from the Institute of Epidemiology Disease Control and Research and the International Centre for Diarrhoeal Disease Research, Bangladesh

Objectives

- Meet Bangladesh counterparts and foster a working relationship
- Enhance laboratory and Biopreparedness capacity & the transfer of scientific knowledge while supporting the Global Health Security Agenda
- Continue to strengthen the partnership between the US, Bangladesh, and Nepal
- Increase the collaboration between military and civilian entities within Bangladesh to foster enhanced surveillance of disease outbreak and prevalence
- Increase readiness among military participants from both countries
- Discuss objectives for future engagements.

Activities

- Discussed the following topics: Pre/post Deployment Medical Screenings, Role of Army Medical Corps in UN Peacekeeping Operations, Waterborne Diseases and Bioterrorism, SOP for Emergency Response, Bovine Tuberculosis, Emerging/Reemerging Diseases, and Anti-microbial Resistance.
- Table-top Exercise to measure current capabilities and introduce discussion of various outbreak scenarios.

Key Take-Aways

- Multiple nation involvement demonstrates the keen awareness that an outbreak in the region could quickly involve neighboring nations.
- The Bangladesh Armed Forces view the Clinical Laboratory and Biopreparedness SMEE as a health engagement series with numerous opportunities to build upon



Nepal /US Behavioral Health (BH) Subject Matter Expert Exchange



Event:

Regional Health Command-Pacific, in coordination with the Office of Defense Cooperation (ODC) - Nepal, executed a military-to-military Behavioral Health (BH) Subject Matter Expert Exchange (SMEE) with the Nepalese Army focusing on BH operational readiness.

Strategic Objective:

Demonstrate continuing U.S. commitment in the region while influencing and developing relationships, offering US solutions to BH challenges IOT improve Nepalese Army medical capacity, and enhancing behavioral health readiness through the sharing of best medical treatment and practices.

Activities:

The SMEE was conducted from 17-20 April 2018, in Kathmandu, Nepal. The team consisted of two BH professionals from RHC-P, one clinician from PACAF, one BH professional from PHCoE, two analysts from CGHE, and approximately twenty-five Nepalese Army psychiatrists, psychologists, pharmacists and members of the Nepalese Universities. The SMEE included discussions and hands-on exercises on topics ranging from psychosocial support in Nepal to the impact of disasters on children.

In addition, IPC participants visited Shree Birendra Army Hospital to observe the capabilities and current state of operations, and to receive a mission brief from the hospital leadership.

Discussion and Key Take-Aways

Participants from both countries shared experience-based behavioral health, identified current behavioral health successes and challenges, and offered means to sustain or improve them. Strengths identified included the first-hand disaster experience, competence and motivation for expanding capabilities of the Nepalese medical personnel, while challenges include patient access to care, excessive workload demands for BH personnel, and limited BH metrics and training. This successful engagement established a way forward for continued behavioral health cooperation between the US and Nepalese Armies, potentially focusing on Telebehavioral Health and Telemedicine, providing BH extenders via their NCO Corps, implementing BH questionnaires into annual assessments and other topics of consideration.



Lt Col (Dr.) Rawal discusses the Nepalese psychiatry profile



Delegates recognize guest speakers from the Nepalese network



Maj Gen (Dr) Rai provides a summary review of the Exchange



Delegates discuss challenges and potential solutions



2018 Nepal/US Behavioral Health SMEE Participants

AMERICA'S ARMY:

SERVICE TO THE NATION,
STRENGTH FOR THE FUTURE

Regional Health Command – Pacific (TAMC) Palau Urology Humanitarian Mission

Event

- Regional Health Command - Pacific (RHC-P) Palau Urology Humanitarian Mission 2016:
Three person RHC-P team, fully-funded missions by Republic of Palau's Ministry of Health
- Provide Urology support to Palau citizens on-site and triage patients requiring major surgical interventions for air-evacuation

Communications Objectives

- Supports USPACOM and USARPAC Theater Security Cooperation objectives
- Interact with Palauan health care teams and officials to treat Palau citizens
- Help Facilitate air-evacuation of Palauan citizens to higher level of care as needed to include but not limited to TAMC, Philippines, or Korea

Activities

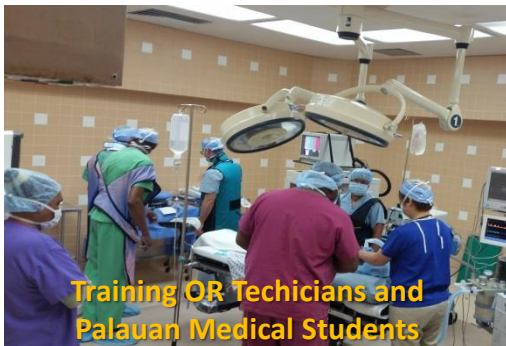
- Medical training to local providers on the evaluation and treatment of diseases of the genitourinary tract and retroperitoneum.
- Provide Urologic preventative medicine, Outpatient, Inpatient, Preoperative, and Postoperative care following surgical intervention
- Maintain and improve the infrastructure for ongoing Urology Medical Missions to Palau

Key Take-Aways

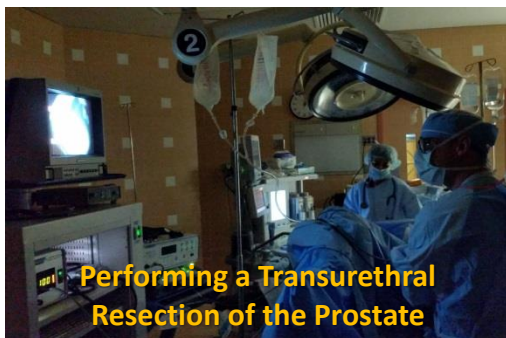
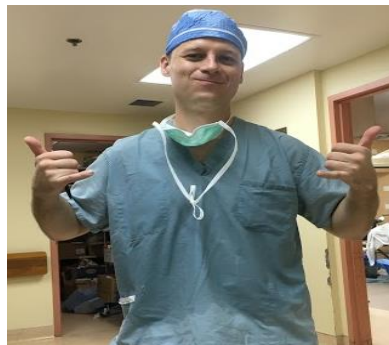
- Continued coordination between the Government of the Republic of Palau, USARPAC, MEDCOM, and RHC-P.
- TAMC Urology Team managed 200 patient encounters and performed 35 surgeries.
- Improved PHC-P medical proficiencies in international settings.



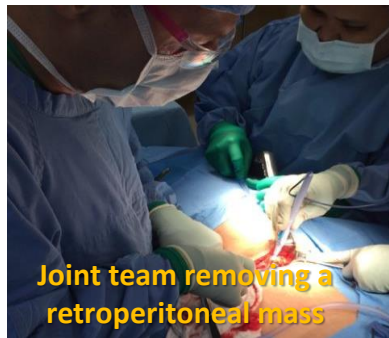
Team Building with the Hospital Staff and their families



Training OR Techicians and Palauan Medical Students



Performing a Transurethral Resection of the Prostate



Joint team removing a retroperitoneal mass

AMERICA'S ARMY:

SERVICE TO THE NATION,
STRENGTH FOR THE FUTURE

Regional Health Command – Pacific (TAMC) Palau ENT Humanitarian Mission

Event:

- Pacific Regional Medical Command (PRMC) Palau Ear, Nose, & Throat (ENT) Humanitarian Missions 1975-2016:
 - Three to Six-person PRMC teams, fully-funded missions by Republic of Palau's Ministry of Health.
 - Provide Otolaryngology support to Palau citizens.

Communications Objectives:

- Supports USPACOM and USARPAC Theater Security Cooperation objectives.
- Interact with Palauan health care teams and officials to treat Palau citizens.

Activities:

- Medical training to local providers on the evaluation and treatment of diseases of the ear.
- Otolaryngological surgical intervention.
- Auditory rehabilitation of chronic ear diseases.

Key Take-Aways:

- Unique, long-term coordination between the Government of the Republic of Palau, U.S Department of State, USARPAC, MEDCOM, PRMC, and Tripler Army Medical Center.
- ENT Team routinely has over 600 patient encounters, performs over 100 clinic procedures and roughly 40 surgeries.
- APA Signed Feb 2016
- Improved MEDCOM medical proficiencies in foreign environments.





BSA Troop 4 (Austin Licina Eagle Candidate) in partnership with
The RMI Ministry of Health, Hawaii Pacific Health, the Matson Foundation and American
Customs Brokerage Co, Inc.

HAWAII
PACIFIC
HEALTH

KAPI'OLANI
PALI MOMI
STRAUB
WILCOX



American Customs
Brokerage Co.

Matson®
FOUNDATION



Partnering for Health with RMI

An Eagle Scout Community Service Project (Austin Licina)



A Portion of the Inventory List

Item	Description	Quantity	ValueTotal
ExamTable(used)	brownmetalframe,leatherTop,threeDrawers	4	\$2,000
ExamTable(used)	brownwood,SixDrawers	1	\$500
InfantExamTable(used)	PinkwithGreyleatherTop,WeightScale,3Drawers,Cabinet)	1	\$500
ExamTable(used)	RitterbyMIDMARK204Graypolymer,GreyleatherTop,threeDrawers	1	\$500
ExamTable(used)	GreyFiberBoard/wood,PinkleatherTop,threeDrawers	1	\$500
BiogelExamGloves	PowderFreePolyisopreneUltraTouch	1pallet(18Cases,200pairsperCase)	\$15,480
BiogelExamGloves	PowderFreePolyisopreneUltraTouch	1pallet(18Cases,200pairsperCase)	\$15,480
HospitalScrubUniforms(used/lauded)	StandardTextileBlue55%otton/45%Poly(XLsizes)	200pair	\$1,000
Crutches(used)	GuardianMetalwithGreyRubberTusions	3.5pair	\$70
SutureRemovalTray	MedicalActionIndustries	59	\$120
ElasticGauzeBandage	Elastomull2x4.1yds	7packs(12piecesea)	\$70
10mlSyringe	BDsyringeLuer-lokTip	1box(100)	\$52
FaceShield	TechStylesSplashMaskAnti-fog/stat	25	\$50
Diapers	PreemiePampers	17packs	\$68
SterileProxodureKit	SonoSiteAxolTrack18G	18	\$150
Guidewire	TeleflexMedical2035InDoubleEnded/straight1.25mm	3	\$30
BiliaryBalloonCatheter	Taut6mm2.0cm	5	\$100
BiliaryStoneBasket	0.8mm100cmFlatWire	6	\$900
UrethralCetherizationTray	BardLatexfreeWithoutCatheter(772100)	38	\$114
Non-LatexGloves	BiogelPIOrthoPro	120pairs	\$160
SpecimenTrap	80ccBusse	4	\$6
VacuretteCannula	GyrusAcmi9mm(8)and16mm(9)	17	\$40
SuctionCatheterKit	Kendall	4	\$4
PrecisionGlideNeedle	BD22Gx1.5"	100	\$14
PlainPackingTip	Curad1/4"x3.5yds	12	\$36
SuctionCatheter	KendallSafe-T-Vac6Fr	5	\$4
Lo-ProOral/nasalTube	7.0mmID	1	\$75
REMPolysensitiveAdultPatientReturnElectrode	CovidienPolyREMAdult	7	\$700
Stockinette	albahealth6"x60"CottonDoubleply	1	\$115
HeadCradleFoamPositioner	cardinalhealth2Adult	4	\$20
LaminectomyArmyCradleFoamPositioner	Cardinalhealth	14pair	\$135
MultilumenCVCkit	ArrowgardBluePlus	2	\$100
ChloraprepW/Int	OneStep	10	\$9
Sponges2"x4"	CovidienKerlix	2	\$5
UrineMeterFoleyTray	BardLatexFree	1	\$20
TubingSet,Gravity,Aspike	ConMed	1	\$99

Approx \$40K USD



Partnering for Health with RMI

An Eagle Scout Community Service Project (Austin Licina)



Loading Shipping Container





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Mr. Brad Cogswell, MPA, MPH
Global Health Engagements

brad.j.cogswell.civ@mail.mil
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